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Partners and Peers: Sexual and Dating Violence Among NYC Youth

A Research Report by the
New York City Alliance Against Sexual Assault
and the Columbia Center for Youth Violence Prevention,
Columbia University

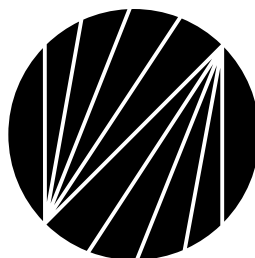


Partners and Peers: Sexual and Dating Violence Among NYC Youth

**A Research Report by the
New York City Alliance Against Sexual Assault
and the Columbia Center for Youth Violence Prevention,
Columbia University**

***By Deborah A. Fry, Leslie L. Davidson,
Vaughn I. Rickert, and Harriet Lessel***

*With assistance from Daisy Deomampo,
Niki Palmetto, Mónica G. Paz,
and Saroj Sedalia*



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Against Sexual Assault**

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Foreword from the NYC Alliance Against Sexual Assault

The NYC Alliance Against Sexual Assault is proud to release its groundbreaking study *Partners and Peers: Sexual and Dating Violence among NYC Youth*, providing NYC-specific information on high school age youth's experiences with sexual and dating violence. *Partners and Peers* surveyed boys and girls in a school-based setting and asked extensive questions about help-seeking behaviors.

In a time of limited resources, the Alliance wants to ensure that efforts target those most in need. Current national and local research reveals that adolescents are more likely to experience sexually violent crimes than any other age group. Building upon these studies and utilizing validated scales, *Partners and Peers* fills a gap in the local information that is required to determine the most effective response.

Partners and Peers found that youth tell other youth—if they tell anyone at all—about their experiences. This makes it essential that information is available to teens in a format they can utilize. The Teen Health Map, with a subway map on one side and youth-friendly referral guide to health and sexual violence resources on the other, was developed by the Alliance to support those who participated in the study. This has become an important resource on its own as a confidential source of information that youth can share with each other. In its second printing, the map has been purchased by the NYC Department of Education and Department of Youth and Community Development for those they serve. The Teen Health Map was tested extensively and developed to young people's specifications for use and confidentiality.

The Alliance was fortunate to have fantastic project partners, and wishes to thank the NYC Council for its interest and funding of the project. *Partners and Peers* was jointly conducted with the Centers for Disease Control and Prevention-funded Columbia Center for Youth Violence Prevention. Dr. Leslie Davidson and Dr. Vaughn Rickert from that center are inspiring to work with, especially in their interest in how research can be used in real-life settings to effect change. The four school principals that considered sexual and dating violence an important enough problem to participate in the study are wonderful examples of leaders interested in school-community partnerships. Many thanks go out to them and the NYC Department of Education.

The findings of *Partners and Peers* reveal the urgent need to address the risk factors for experiencing sexual violence, to understand the health and psychosocial implications of victimization, and to increase resources for preventing violence among NYC youth. Due to their increased vulnerability, youth remain a priority for the Alliance's programming. The Alliance looks forward to working with various partners in the public and private sector to join in making a difference in the lives of New York City's young people.



Harriet Lessel, Executive Director
New York City Alliance Against Sexual Assault

Foreword from the Columbia Center for Youth Violence Prevention

Violence and coercion are not isolated phenomena in the lives of young people. Often when people speak of youth violence, they mean gang violence. It is clear from this report about adolescents in New York City, and from other research around the country, violent behavior and coercion characterize many early romantic and sexual relationships among young people. The Columbia Center for Youth Violence Prevention (the CCYVP) is grateful for the opportunity to work with the superb leaders and researchers (Deborah Fry and Harriet Lessel) at the NYC Alliance Against Sexual Assault to plan and carry out this study. The CCYVP wishes to thank the students, parents, teachers, and principals, without whom nothing would have been learned.

Partners and Peers begins to delineate some of the patterns found in the violence involving young people. It is extremely common and affects all genders, both those who inflict violence and those who receive it, older and younger adolescents. The high school students in the study were clear in what they reported; sexual and physical dating violence often occur together and prevention efforts need to take this into account. Often both people in a relationship are engaged in coercive behavior, sometimes just one. Intimate partner violence among young people is associated with other forms of violence—with the use of weapons, gang membership, and fear. It is also related to the health status of both victims and perpetrators.

There are many questions that need further exploration in order to identify risk and protective factors. For example, the study found that young women were more likely to hit a male partner than young men were to report hitting a female partner—because the study was a survey, the degree of physical damage done or the meaning of the action itself is not known. These issues are important to understand in order to plan prevention, intervention, and care.

Acknowledging the strengths and limitations of what is known, these findings need to be shared with key stakeholders in the community of New York City—the students, parents, educators, healthcare professionals, and policymakers. Plans must be made to learn what will prevent these harmful behaviors and how to protect the young people who are experiencing them. This will involve education, research, and policy. The Columbia Center for Youth Violence Prevention looks forward to participating in these efforts.



Bruce G. Link
Director of the Columbia Center for Youth Violence Prevention
Columbia University

Acknowledgements

This study was conducted by the research department at the New York City Alliance Against Sexual Assault (the Alliance), led by Deborah Fry, and the Columbia Center for Youth Violence Prevention (the CCYVP) at the Mailman School of Public Health, by Principal Investigator Dr. Leslie Davidson and Coinvestigator, Dr. Vaughn Rickert.

The study would like to thank all participating youth for sharing their thoughts and experiences so work can begin to end sexual and dating violence. The study would also like to thank the youth who assisted in developing and piloting the survey questionnaire: their input made a difference and was much appreciated. Additional thanks go to the wonderful parents, more than 90% of whom recognized the importance of this work and permitted their children to participate.

Special thanks goes to the research associates and assistants who helped collect data in the schools, monitored the data entry, and worked on developing this comprehensive report: Daisy Deomampo, Niki Palmetto, Mónica G. Paz, and Saroj Sedalia. Without their support, enthusiasm, and tireless efforts, this study would not have been possible. A big thank you goes to the data-entry volunteers, Christy Banister, Sylvan Rosas, Erin Hopkins, and Elizabeth Richards for their meticulous attention to detail and dedication to entering the survey data for the study. Gracious thanks also to the interns who helped produce this report, especially Lauren Lorek and McKenna Knych.

The study would like to thank the New York City Department of Education for recognizing the importance of studying sexual and dating violence among youth. A warm thank you goes to the four participating schools and their staff. Particular thanks go to the leadership of the school's principals and district superintendents for working with the Alliance and the CCYVP on the Institutional Review Board protocols, Department of Education approvals, and data collection process. Without

them, this project could not have succeeded. Their tireless effort to understand the experiences and improve services for youth is extraordinary.

Personal thanks go to the individuals who helped translate the survey instrument, parental consent letters, and student consent forms: Teresa Román from Portada, LLC., for the Spanish translations, and staff members from the Language Lab & Translation Company of America for the Spanish back-translations and the Chinese translations. This allowed for a bilingual study with trilingual consent forms in a multicultural city. Gratitude also goes to the stakeholders who reviewed the various survey drafts and many of whom provided input for improving this report. The study is especially grateful to Bill Bacon for programming the ACASI version of the survey and recording the voices for the computer-based survey in Spanish and English, using male and female voices.

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Extraordinary thanks goes to the following Alliance staff: Tamara Pollak, previous program director; Jenn Tierney, previous communications director; Chris St. John, community action coordinator; Deiderie Armstrong, assistant director; Tamecca Phillips, administrative assistant; as well as an extra-special thanks to Harriet Lessel, executive director, for her vision and ongoing support of this research project. Warmest thanks go to all of the Alliance's board members who commented on drafts of the report and for their leadership in supporting youth initiatives.

At Columbia University, the study wishes to thank staff and associates of the Columbia Center for Youth Violence Prevention for assistance in inter-

preting and disseminating the study findings to parents and teachers, as well as city and national communities. The following folks were particularly helpful: Monalissa Paredes, Saroj Sedalia, Peter Simon, and Mariko Geiger.

Last, a warm thank you goes to William F.B. O'Reilly and Lindsay Dussing from Nicholas & Lence Communications, LLC., who have worked with the Alliance and the CCYVP to ensure that these study findings are disseminated widely throughout New York City. Due to their support and work, the study has been able to reach many New Yorkers about the importance of addressing and responding to youth sexual and physical dating violence.

This research and publication was funded by grants from the New York City Council and the Centers for Disease Control and Prevention and the study would like to thank these two funders for their contributions to understanding youth sexual and dating violence and to developing evidence-based programs to address this violence. The opinions expressed in this report are those of its authors and do not necessarily represent the views of the New York City Council nor the Centers for Disease Control and Prevention.

About the Authors

Deborah Fry, MA, MPH is the research director at the New York City Alliance Against Sexual Assault. At the Alliance, Deborah works on citywide research projects, all geared toward helping improve service delivery for survivors in NYC and evaluating prevention and intervention programs. Current projects include *Partners and Peers: Sexual and Dating Violence Among NYC Youth* with the Columbia University Center for Youth Violence Prevention, *ARISE: Action Research for Immigrant Social Empowerment* with a coalition of six community-based organizations, *Translating Research into Practice: Best Acute Care for Sexual Assault Patients*, and evaluation of the Primary Prevention Demonstration Project in NYC. Recently completed Alliance research reports include *Bringing the Global to the Local: Using Participatory Research to Address Sexual Violence with Immigrant Communities in NYC* (2008), *A Room of Our Own: Survivors Evaluate Services* (2007), and *How S.A.F.E. Is NYC? The Services Available to Sexual Assault Patients in NYC's Emergency Departments* (2007). In addition to conducting primary research, Deborah provides technical assistance to the NYC rape crisis programs and is a volunteer rape crisis advocate with the Crime Victims Treatment Center at St. Luke's-Roosevelt Hospital. Ms. Fry has a master of arts degree from the Maxwell School of Citizenship and Public Affairs at Syracuse University, and her master of public health degree from Columbia University. Deborah was also a Fulbright Research Scholar from 2001 to 2002.

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Harriet Lessel, LCSW is the first and current executive director of the New York City Alliance Against Sexual Assault. Ms. Lessel led the effort to create an organization that focused on a citywide response to intervention and prevention of sexual violence in conjunction with the City's rape-crisis programs. She has dedicated her career to supporting survivors and eradicating sexual assault through counseling, advocacy, community organizing, and public education. Prior to her work at the Alliance, Ms. Lessel's thirty years of experience includes managing the largest multiservice hospital-based rape crisis and domestic violence program in Brooklyn, opening the first Sexual Assault Examiner program (also in Brooklyn), managing youth development and senior programs, and providing direct counseling and advocacy services to at-risk teens and their families. Ms. Lessel has a master's degree in social work from Columbia University and is a licensed clinical social worker in the State of New York.

*“What I know now is that if I had known I wasn’t alone, I may have been able to help him and to help myself. I usually have one message for young people who may go through something similar:
You are not alone.”*

—female teen dating violence survivor

Executive Summary

“I have come to understand over the past few years how prevalent of a problem teen dating violence truly is. When I look back at my own situation, I always believed that I was alone. I believed that my situation was different. I wanted to feel as if I was doing the right thing by letting myself stay in the abusive relationship. What I know now is that if I had known I wasn’t alone, I may have been able to help him and to help myself. I usually have one message for young people who may go through something similar: You are not alone.”

—female teen dating violence survivor

Sexual and dating violence is not only a crime that disproportionately affects adolescents and young adult women, it is a huge challenge for those who are responsible for the wellbeing of youth in New York City—this includes health professionals, educators, community leaders, and public officials. It is a central concern for young people themselves and for their parents.

Research has demonstrated that both male and female victims of sexual and dating violence are at greater risk for developing an array of health risk behaviors and adverse life outcomes affecting psychological, social, and physical wellbeing. Given that childhood and adolescence is a time of increasing risk and vulnerability for sexual and dating violence, as well as a time when sexual violence can have overwhelming and injurious effects, it is critical more learning and continued improvement occur, as well as a deeper understanding of how violence develops in relationships, how it is related to other negative behaviors, and how to prevent it. Assisting young people facing these problems and learning how to avoid the harmful outcomes resulting from these experiences is key.

The *Partners and Peers* study was conducted to establish baseline data on the prevalence and

nature of sexual and dating violence among young people in New York City area schools. This includes information on perpetration of sexual and dating violence, disclosure of violence, the degree of association with exposure to community violence, and the degree of mutual participation in partner violence, all with the aim of developing effective intervention and prevention programs. The study was carried out jointly by the New York City Alliance Against Sexual Assault and the Columbia Center for Youth Violence Prevention. The study partners combined resources and expertise to conduct this study and to advocate for social and systems change in New York City.

The study was conducted in four public high schools in New York City and all students were invited to participate. The New York City Department of Education granted researchers permission to enroll NYC high school students anonymously, with their parents’ consent, and their own permission with the agreement of school principals and district superintendents. Students from four schools, reflecting a range of cultural groups, were asked to participate. Schools were selected through convenience sampling, three in Manhattan and one in Brooklyn. In all, the Alliance and CCYVP surveyed 1,454 students. Of these, 64 surveys were incomplete and were eliminated due to the extensive missing data. (See, for full explanation of sampling procedure, Appendix A: Methodology on page 75.) The total sample size for the analyses presented is 1,312 youth ranging in age from 13–21. This data collection took place during the 2006–2007 school year and was approved by three Institutional Review Boards.

The Alliance is one of the few nonprofit anti-sexual-violence organizations that conducts applied research for social change. The Alliance works with city agencies, rape crisis programs, hospitals, community-based organizations, and New Yorkers to improve care for survivors and end sexual violence in New York City. The CCYVP is a collaboration of researchers, policymakers, and community

representatives committed to understanding and reducing youth violence. The CCYVP is one of 12 Academic Centers of Excellence funded by the Centers for Disease Control and Prevention. Both organizations are committed to ending sexual and dating violence *before* it occurs. The study seeks to assist youth experiencing this violence and represents the first comprehensive exploration of teen sexual and dating violence in New York City.

Partners and Peers reports on male and female adolescent perpetration and victimization in their dating relationships. The study does not in any way wish to undermine the clear and widely accepted understanding that the impact of relationship violence falls primarily on women who suffer the majority of severe forms of violence—battering, stalking, rape, and murder.

Key Findings:

Sexual and dating violence are extremely common among NYC youth. In this study, 16% (or more than one in six students) reported experiencing sexual violence at some point in their lives. Of these youth, 10% reported ever experiencing nonpartner sexual violence (sexual abuse or forced sex). Fourteen percent reported experiencing partner sexual violence (either current or past). Youth were also asked how often in their lives any (current or previous) partner had hurt them physically. Among students with a dating history, more than half (56%) reported experiencing physical dating violence. Of these youth, more than a quarter (27%) reported ever being pushed or shoved by a dating partner, and 11% said that a dating partner punched them at some point in their lives.

Dating violence is often inclusive of both physical and sexual violence. There is tremendous overlap between the various forms of dating violence. In this study, 71% of youth who experienced threatening behaviors from a dating partner also experienced physical violence from that dating partner. Likewise, 63% of youth who reported experiencing sexual violence from their partner experienced physical dating violence from that same partner.

The violence experienced by NYC youth can be serious and potentially lethal. Though much of the violence reported here involves hitting, shoving, or unwilling/unwanted sexual touching, 8% reported that a dating partner had choked them, and 3% reported that a dating partner hurt them with an object or weapon. Nine percent reported having been forced into sexual activity, and 3% reported rape.

Physical dating violence is not one-sided nor is it all males against females. Thirty-two percent of students, both males and females, reported perpetrating one or more episodes of physical violence against their partners in the past year.

Youth experience sexual violence from people they know. In this study, 89% of youth who had experienced sexual violence at some time in their lives said it was committed against them by someone they knew. Youth are experiencing this violence at the hands of people they know and trust, such as their dating partners, family members, and other acquaintances.

Many young people do not feel that being hit, shoved, or forced into sexual behavior is “abuse” or “violence.” Only 20% of youth who had experienced physically or sexually violent behaviors from a dating partner said yes when asked if they had experienced “physical or sexual violence.”

Youth tell their friends first, though about 40% never told anyone. More than half (59%) of youth who reported they had experienced sexual or dating violence had told someone about their experiences. Youth are most likely to tell their friends *first*. Overall, 88% of youth told their friends about the violence, whereas 52% told their parents or another adult. Nearly a quarter (or 24%) sought help for sexual and dating violence from a health professional, teacher, or guidance counselor.

Youth experience adverse health outcomes linked to physical and sexual dating violence. Both victimization and perpetration of physical and sexual dating violence is linked with adverse health outcomes for youth. Youth currently experiencing physical *and* sexual violence in their dating relationships are nearly two times more likely to report high emotional discomfort and three-and-a-half

times more likely to report high physical discomfort than youth not currently experiencing this violence. Likewise, youth who report either experiencing or perpetrating sexual violence in their current dating relationship are two-and-a-half times more likely to rate their health as fair to poor than youth who are not.

Dating violence does not occur in a vacuum: Perpetrating other forms of youth violence is associated with perpetrating physical and sexual dating violence. For boys, carrying a weapon within the last 30 days and/or gang membership in the past year were both risk factors for perpetrating sexual violence against an intimate partner. Girls who reported being in a physical fight within the past year were more likely to perpetrate physical violence against a dating partner than girls who did not.

Youth who have experienced nonpartner sexual violence are at an increased risk of being either a perpetrator or a victim of dating violence. Of the youth who reported nonpartner sexual violence, 19% reported sexual violence in an intimate relationship in their lives. Boys with a history of nonpartner sexual violence are almost four times more likely to report physical dating violence victimization than males without this history. Likewise, females with a history of nonpartner sexual violence are almost three times more likely to experience physical dating violence than females without. Nearly one in five youth that have experienced sexual violence have experienced *both* partner and nonpartner sexual violence.

Young people care about this issue:

“Now I know how cruel people can be when they take you for granted and do sexual things to you without your okay to do it...”

—17-year-old female

“It made me feel so bad about myself I tried suicide.”

—16-year-old female

“I think that strong communication, trust, and lots of support between people can help reduce sexual or dating violence. Also I feel that information should be everywhere, in case people do need help.”

—18-year-old male

“I haven’t been in an unsafe relationship that was seriously unsafe, just one or two events with one partner that I felt unsafe. But I see in other people’s relationship and if my friends go through it, it hurts.”

—16-year-old female

School principals care about this issue:

“We knew it would be a valuable study that would provide us with a great deal of information about our students. Once we saw the results, we shared them with the entire school community because it was important to educate everyone about the problem.”

—participating school principal

“Conflict and violence in dating relationships is a large problem in our city and in my school, and it is imperative to better understand how we can help our young people maintain healthy relationships.”

—participating school principal

Everyone should!

This study recommends following a two-pronged strategy: preventing sexual and dating violence among NYC youth and providing appropriate response to those who have experienced this violence. Pursuit of these strategies simultaneously is essential to address the scope of sexual and dating violence occurring among the young.

Based on this data, the study recommends:



Schools and programs that work with youth should include a focus on primary prevention. Primary prevention focuses on examining and addressing the root causes of violence so that it can end *before* it occurs.

Teens should have access to youth-friendly, culturally appropriate, and language-appropriate referral information. Given that teens disclose incidents of sexual and dating violence to friends first, providing them with referral information is key to helping them support each other and reducing the stigma around sexual and dating violence. One such resource that the Alliance developed is the NYC Teen Health Map: a subway map on one side and a youth-friendly referral guide on the other, which folds into a discreet card to be tucked into the wallet. The referral guide includes information for youth who may have experienced sexual violence, hotlines to call, free counseling locations, and healthcare centers in each of the five boroughs (see text box: NYC Teen Health Map, page 72).



School personnel and others who work with youth should be trained how to properly handle disclosures and refer youth to services. Since many youth who have experienced sexual and dating violence tell someone about that violence, it is imperative that all those who work with youth are trained in how to properly handle disclosures and how to refer youth to services. Proper responses to disclosures of sexual and dating violence require that sensitivity and respect be given to the survivor. This training should be inclusive of several audiences: youth workers, including after-school program staff; school staff, including principals, teachers, guidance counselors, nurses, security guards, and janitors (among others); and healthcare professionals. This means that appropriate policies and procedures *must* be implemented in these settings.



Healthcare professionals should speak with adolescents about sexual and physical violence. This study expanded on the growing body of literature that shows the connections between sexual and physical violence and adverse health outcomes. These associations highlight the importance of talking about sexual and relationship violence during youth healthcare visits. Healthcare professionals, when assessing the health of teenagers, must consider the impact of current sexual and physical violence and past sexual abuse in contributing to the presentation and exacerbation of physical and emotional symptoms.

How has dating violence or sexual violence affected you?

“It affected me very much because sometimes I can’t even concentrate in school and am also making my parents worry about me.”

—18-year-old female

Chapter 1: Introduction

Defining Sexual Violence and Dating Violence

Throughout this report the terms “sexual violence” and “dating violence” are used to talk about the wide array of violence affecting the lives of youth. “Dating violence” occurs when one partner attempts to maintain power and control over the other through one or more forms of abuse, including sexual, physical, verbal, and emotional abuse (NCADV, 2008). Dating violence affects males and females from diverse racial, social, or economic backgrounds.

“Sexual violence” occurs both within and outside of dating relationships. Sexual violence refers to sexual activity during which consent is not obtained or freely given (CDC, 2007). Like dating violence, anyone can experience sexual violence, and the perpetrator in most cases is someone known to the victim (Bureau of Justice Statistics, 1997). Sexual violence can include physical contact between the perpetrator and victim, such as unwanted touching and forced sex, as well as nonphysical violence, including sexual harassment, threats, intimidation, stalking, and peeping. For this study,

Key Terms Used in this Report

Sexual violence: unwanted sexual fondling, touching, oral sex, or sexual intercourse (penetration of the vagina or anus with a penis, fingers, or an object).

Centers for Disease Control and Prevention (CDC): *Sexual violence* is divided into three categories: (1) Use of physical force to compel a person to engage in a sexual act against his or her will, whether or not the act is completed; (2) an attempted or completed sex act involving a person who is unable to understand the nature or condition of the act, to decline participation, or to communicate unwillingness to engage in the sexual act *e.g.*, because of illness, disability, or the influence of alcohol or other drugs, or due to intimidation or pressure; and/or (3) abusive sexual contact (Saltzman *et al.*, 2002)

World Health Organization (WHO): Any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, or [acts] otherwise directed against a person’s sexuality using coercion, by any person regardless of their relationship to the victim, in any setting, including but not limited to home or work (Jewkes, Sen, and Garcia-Moreno, 2002).

Dating violence: includes sexual, physical, verbal, and emotional abuse in the context of an intimate relationship. In this report, the study focused on unwished-for sexual and physical force rather than emotional and verbal.

Nonpartner sexual violence: perpetrated by a person of any gender who could be a stranger to the victim. It can be also perpetrated by someone known to the victim with whom they do not have a romantic relationship, such as: a parent, family member, older acquaintance (family friend, teacher, minister, neighbor, etc.), and/or a peer who is not a partner.

Current partner: a partner from a relationship within the past 12 months. This term is used throughout the report to measure experiences with dating and sexual violence within the past year.

Ever partner: any partner, current or previous. This term is used to measure the lifetime experiences with physical and sexual violence by a partner.

Victimization: when a person (in this report a high school student) was/has been/is subjected to dating violence or nonpartner sexual violence.

Perpetration: when a person commits an act of dating violence or nonpartner sexual violence against another person.

“sexual violence” or “sexual abuse” is defined as any sexual fondling, touching, oral sex, or sexual intercourse (penetration of the vagina or anus with a penis, fingers, or an object). The phrase “sexual and dating violence” refers to youth experiences of both partner violence (physical and/or sexual) and nonpartner sexual violence. These terms are used together, since many youth reported experiencing both types of violence and the risk and protective factors overlap.

Overview of Sexual and Dating Violence among Youth

Nationally, between 7% and 10% of girls ages 12–17 have experienced some form of sexual assault, rape, or child sexual abuse (Deomampo, 2007). Sexual and dating violence disproportionately affect youth, with young women ages 16 to 24 experiencing the highest rate of intimate partner violence (USDODJ, 1997). The National Crime Victim Survey indicates that adolescent females ages 16 to 19 are four times more likely than the general population to experience sexual assault, rape, and attempted rape (Rennison, 2002). The National Center for Juvenile Justice estimates that in two-thirds of sexual assault cases reported to U.S. law enforcement agencies, the victim was younger than 18 at the time of the crime. These numbers are of concern given that *reported* violence is often just the tip of the iceberg. Thus, it is not surprising that sexual violence is often referred to as a “hidden crime” or “silent epidemic,” as rape and sexual assault are so infrequently reported to the police and other authorities (Harner, 2003).

Recent research has also focused on violence in young people’s dating relationships. One study found that one in five female high school students reported experiencing physical and/or sexual violence from a dating partner (Silverman *et al.*, 2001). Another study of nearly 2,000 eighth and ninth grade students revealed that 36% of adolescents in relationships reported being the victim of at least one episode of nonsexual dating violence, and 11% of these had been a victim of at least one episode of sexually violence in their dating relationships (Foshee *et al.*, 1996).

Among NYC Youth

In a study of urban female adolescents ages 14 to 23 who presented for health services at Mount Sinai Adolescent Health Center, approximately one in four reported having an unwanted sexual experience in the past year (Rickert *et al.*, 2004). A study of young NYC women between the ages of 15 and 24 visiting the Planned Parenthood clinic found a high prevalence of dating relationships characterized by physical violence (22%), coercion (60%), and forced sexual experiences (27%) (Davidson, 2004).

With the Youth Risk Behavior Survey (YRBS) data, the NYC Department of Health and Mental Hygiene (DOHMH) found that from 1999 to 2005, dating violence increased by more than 40%, meeting national prevalence levels in 2005 (Olson *et al.*, 2007). According to 2007 YRBS data, which asks one question about physical violence, one in nine New York City teens (11%) report experiencing being physically hurt by a partner. Girls are no more likely than boys to have been physically hurt by a partner, but girls are more likely to have been forced to have sex by someone (9% of girls vs. 7% of boys) (NYC DOHMH, 2008).

The New York City Domestic Violence Hotline receives an average of a thousand calls from teenagers every month (Mayor’s Office to Combat Domestic Violence (MOCDV, 2006)). Very few of these youth seek out formal services, as only approximately 10% of domestic violence victims seen in the city’s public hospitals are under the age of 20 (MOCDV, 2005).

The violence experienced by youth can be lethal: Nearly half of all female homicide victims in New York City are killed by an intimate partner. Of these intimate-partner homicides, teenagers make up approximately 8% of victims, or 4% of all female homicides in New York City (Wilt, Illman, and Brodyfield, 1996).

Focus of the Research

What are the prevalence, nature, and experiences of sexual and dating violence among New York City high school students? This question was the main focus of the research study conducted jointly

Table 1: Prevalence of Sexual Violence among Youth in NYC: Selected Studies 1997–2007*

Authors and Year	NYC Sample	Methodology/Design	Findings
Eastwood, E.A. and J.M. Birnbaum, 2007	224 adolescents with HIV seen at an adolescent medicine clinic in NYC	Longitudinal survey	43% of adolescents surveyed reported experiencing sexual abuse
Olshen, E., <i>et al.</i> , 2007	Youth Risk Behavior Survey 2005 data for NYC; population-based sample of 8,080 students at 87 public high schools	Survey	Lifetime history of sexual assault was reported by 10% of females and 5% of males; dating violence in the past year was reported by 11% of females and 9% of males
Diaz, A., <i>et al.</i> , 2004	146 female patients aged 12–22	Direct physician inquiry of adolescent females during routine history-taking and medical examination	Of the 141 female adolescents for whom no history of sexual victimization was known at the time of the routine medical history and physical examination, 32 (23%) disclosed a history of sexual abuse
Rickert, V.I., <i>et al.</i> , 2004	689 female adolescents between 14 and 23 who presented for health services at the Mt. Sinai Adolescent Health Center	Cross-sectional survey	Approximately 1 in 4 urban young women reported having an unwanted sexual experience in the past year
Dunlap, E., Golub, A., and B.D. Johnson, 2003	98 female subject from 72 severely distressed families in Central Harlem, South Bronx, Brownsville, and East New York	Longitudinal ethno-graphic study: semi-structured interviews, rapport of long-term relationship, and direct observation	Adult sexual contact with young girls was widespread and even the norm in many impoverished inner-city households; the majority (60 of 98) of the participants reported having been compelled to have sexual contact by the age of 13
Freudenberg, N., <i>et al.</i> , 1999	169 young people between 12 and 21 completed semi-structured interview; 27 young women participated in focus groups; 194 incarcerated males 16 to 18 years old completed interviews	Street survey, focus groups, interviews, and observations of several youth programs	20% reported that they had experienced unwanted sexual touching or rape; the young men interviewed in jail described considerable levels of violence; more than one-quarter (26%) reported they had been physically or sexually abused
Molnar, B.E., <i>et al.</i> , 1997	775 homeless and runaway youth (in Denver, NYC, and San Francisco)	Survey	Among females, 70% reported sexual abuse and 35% reported physical abuse; sexual and physical abuse before leaving home were independent predictors of suicide attempts for females and males

*From: Deomampo, D. (2006).

by the NYC Alliance Against Sexual Assault and the Columbia University Center for Youth Violence Prevention.

Additional research questions included: What is the degree and nature of mutual participation of youth in violence within their relationships? What implication does this have for developing prevention programs for dating violence? Also, how is dating violence associated with exposure to other forms of violence?

This research seeks to improve understanding of youth experiences of sexual and dating violence, with the equally important goals of improving services for youth experiencing violence and preventing sexual and dating violence before it occurs.

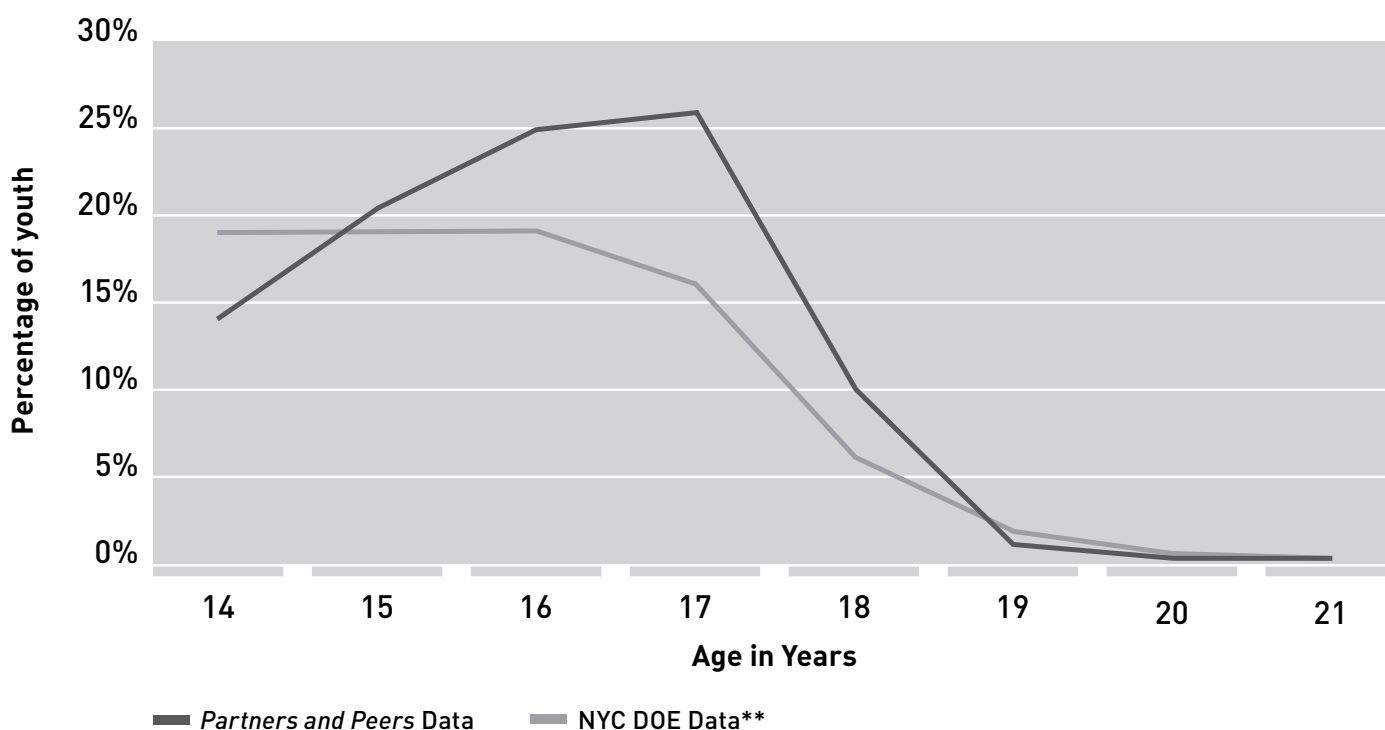
Though much of the violence this study reports is not severe, some of it is, including rape and potentially lethal actions. The study cannot come to any conclusions about the relationship of moderate

sexual and physical violence to the more severe end of the spectrum. Answering that question requires a larger, long-term study. It may be that the high proportion of young people experiencing coercion and violence in their dating relationships is not related to the more serious battering relationships that lead to disability and/or death. Nonetheless, it is clear from the research described in this report that even the mild end of this spectrum is harmful to the young people experiencing such violence.

Participants in the Study

The Alliance and CCYVP surveyed 1,454 students at four high schools in New York City during the 2006–2007 school year. Of these, 64 surveys were incomplete and were eliminated. (See, for detailed explanation of sampling procedure, Appendix A: Methodology, on page 75.) The total sample size for the analyses presented in this report is 1,312.

Figure 1: Age Distribution of Sample Compared with NYC Data*



*Both *Partners and Peers* sample and NYC DOE data is for the 2006–2007 school year.

**NYC DOE data obtained from the NYC Department of Education is for the 2006–2007 school year. Age is calculated as of October 31, 2006. This data includes youth in all NYC public schools.

The overall response rate for the study was 70% of students in the four schools.

Of the youth surveyed, 56% (737) were female and 44% (574) were male (with the data from one survey missing the answer to gender). Figure 1 represents the age distribution in the sample compared with the age distribution of all students in NYC public high schools. The majority of youth in this study were 15–16 years old. The distribution across grade levels was nearly equal, with 28% of youth in grade nine, 25% in grade ten, 24% in grade eleven, and 23% in grade twelve, with approximately one-quarter of participants in each grade. These schools were not chosen as representative of the whole population of NYC youth.

The majority of participants identified as Latino (73%), with the remainder identifying as black (19%), Asian (3%), and white (2%). Of those who reported Latino ethnicity, 53% identified as Dominican, 26% as Puerto Rican, and 3% as Mexican. More than three-quarter (77%) of those surveyed were born in the United States and 66% spoke English at home. Of those who spoke another language at home, 91% spoke Spanish, 6% spoke Chinese, and the remaining 4% of students spoke either Creole, French, Korean, or another language.

Three-quarters (78%) of students reported that they were not working. More than half (51%) reported living in a one-adult household, and 52 youths (4%) reported that they did not live with any adults.

Youth Relationships and Sexuality

Of the 1,312 students with sufficient data, the majority identified themselves as heterosexual (91%), with the remaining identifying as homosexual, bisexual, or “not sure.”

The majority of student surveyed (78%) reported they had started dating or had at least one romantic relationship at the time of the survey. Almost nine out of ten of them were in a current relationship. When thinking about a recent relationship, 51% reported dating that person exclusively, and 71% reported that the relationship was important or very important to them. The range of relationship length varies, with 17% of youth reporting they dated their current or most recent partner for less than one month, 21% report that the relationship lasted between one and three months, 16% reported between three and six months, and 17% reported between six months and one year. Nearly a third of the respondents (30%) reported they are with or have dated the same partner for more than a year.

Approximately two-thirds (63%) reported being sexually active in the past year. Thirty-eight percent reported they had not had sex with their partner, 48% reported they had sex only with their partner, and 6% reported having sex with people other than their partner.

Of the youth surveyed, 14% of girls reported they had ever been pregnant, and 12% of boys reported they had made someone pregnant. Less than one-third of these young women had been pregnant two or more times, and less than half of the young men who had made someone pregnant had done so on two or more occasions. In addition, 16% of these young women reported they have one or more children, and 21% of these young men reported having one or more children.

How has sexual violence affected you?

“It makes me suffer. All it does to me is that it makes me feel less okay as a person.”

—14-year-old female

Chapter 2: Nonpartner Sexual Violence

This study assessed the prevalence of nonpartner sexual violence among surveyed youth and measured who perpetrated this violence.

Nonpartner Sexual Violence: What Other Studies Show

In the United States, adolescents between the ages of 12 and 19 are sexually assaulted at rates higher than any other age group (Catalano, 2004). According to the National Crime Victimization Survey, teens age 16 to 19 are three-and-a-half times more likely than the general population to be victims of rape, attempted rape, or sexual assault (Bureau of Justice Statistics, 1996). The National Violence against Women Survey also found that rape is a crime committed primarily against youth. Of the women who reported being raped at some time in their lives, 22% were younger than 12, 32% were between the ages of 12 and 17, and 29% were between the ages of 18 and 24 when they were raped (Tjaden and Thoennes, 1998). More than half of female victims were younger than 18 at the time of the rape.

More than three-quarters (77%) of all completed rapes are committed by someone who is known to the victim (Bureau of Justice Statistics, 1997). According to the National Survey of Adolescents, 74% of youth who reported a sexual assault (4,023) were assaulted by someone they knew well—32% were friends and 21% were family members (Kilpatrick, Saunders, and Smith, 2003).

Sexual violence perpetrated by an adult of any gender who is related to the victim is called “intra-familial” sexual abuse. Prevalence of parental child sexual abuse is difficult to assess due to secrecy, but it is estimated that 20 million Americans have been victimized by parental incest as children (Turner, 1996). One of the nation’s leading researchers on child sexual abuse, Dr. David Finkelhor, reviewed 19 studies and found that most

sexual abuse is committed by men (90%) and by persons known to the child (70%–90%), with family members constituting one-third to one-half of the perpetration against girls and 10% to 20% of the perpetration against boys (Finkelhor, 1994).

Sexual violence is also perpetrated against youth by other youth. According to the Bureau of Justice Statistics, about one-quarter of sexual assault incidents involved offenders younger than 21 (Greenfield, 1996). In a national study of 1,600 juvenile sex offenders, 25% perceived sex as a way to feel power and control, 9% as a way to dissipate anger, and 8% as a way to punish (Ryan *et al.*, 1996).

Sexual abuse early in life has been implicated in vulnerability to repeat sexual victimization—both chronic abuse and future abuse by a different person. Studies have found that women who experienced sexual assault in childhood were two to three times more likely to be raped or sexually assaulted after the age of 16 (Gidycz *et al.*, 1993; Kilpatrick *et al.*, 1997; Tjaden and Thoennes, 2000; Siegal and Williams, 2003). Recently, Classen and colleagues (2005) reviewed 90 empirical studies focused on the prevalence of and risk factors for sexual violence revictimization, and confirmed the elevated risk of sexual assault among child sexual-abuse survivors. Desai *et al.*, (2002) found rates of sexual reassault were even higher for male survivors of childhood sexual abuse: They were almost six times more likely to be revictimized in adulthood.

Research shows a link between a history of sexual abuse and subsequent physical violence in a dating relationship. In a study of undergraduate women, those that were child sexual-abuse survivors were more than two times as likely to experience physical dating aggression and three times as likely to experience psychological aggression in a dating relationship as nonabused women (Banyard, Arnold, and Smith, 2000).

What This Study Measured

This study measured experiences of nonpartner sexual violence. Regarding nonpartner sexual violence, students read the following definition:

Many people experience sexual violence outside of dating relationships, both by people they know and by strangers. This section asks what types of sexual violence you may have experienced in your life. When we ask about “sexual abuse,” we mean any sexual fondling, touching, oral sex, or intercourse (penetration of the vagina or anus with a penis, fingers, or object).

Students were then asked, How often in your life has (including an option for never):

- Your parent sexually abused you or forced you to have sex?
- A family member other than a parent sexually abused you or forced you to have sex?
- An older acquaintance (such as a family friend, teacher, minister, neighbor, etc.) sexually abused you or forced you to have sex?
- Someone else your age whom you knew but was not your partner sexually abused you or forced you to have sex?
- A stranger sexually abused you or forced you to have sex?

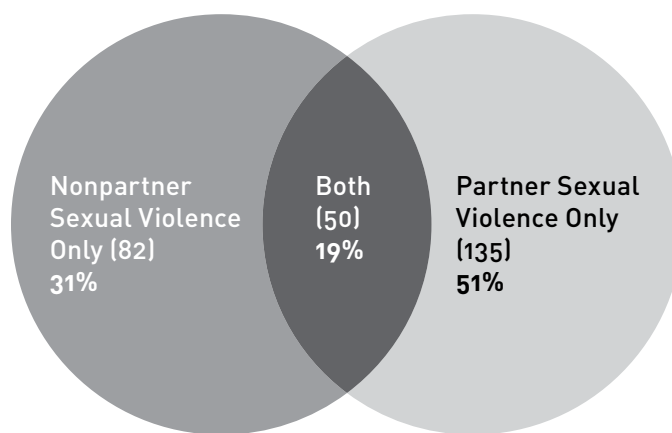
Partners and Peers: Research Findings

Sexual violence is prevalent among NYC youth. This study found that 16% (or more than one in six students) reported having experienced sexual violence at some point in their lives. Of these youth, 10% (or one in ten youth) reported a history of nonpartner sexual violence (sexual abuse or forced sex), and 14% reported a history of partner sexual violence (either current or past). Nearly one in five youth who had experienced sexual violence,

experienced *both* partner and nonpartner sexual violence (see Figure 2: Overlap between Nonpartner and Partner Sexual Violence Victimization).

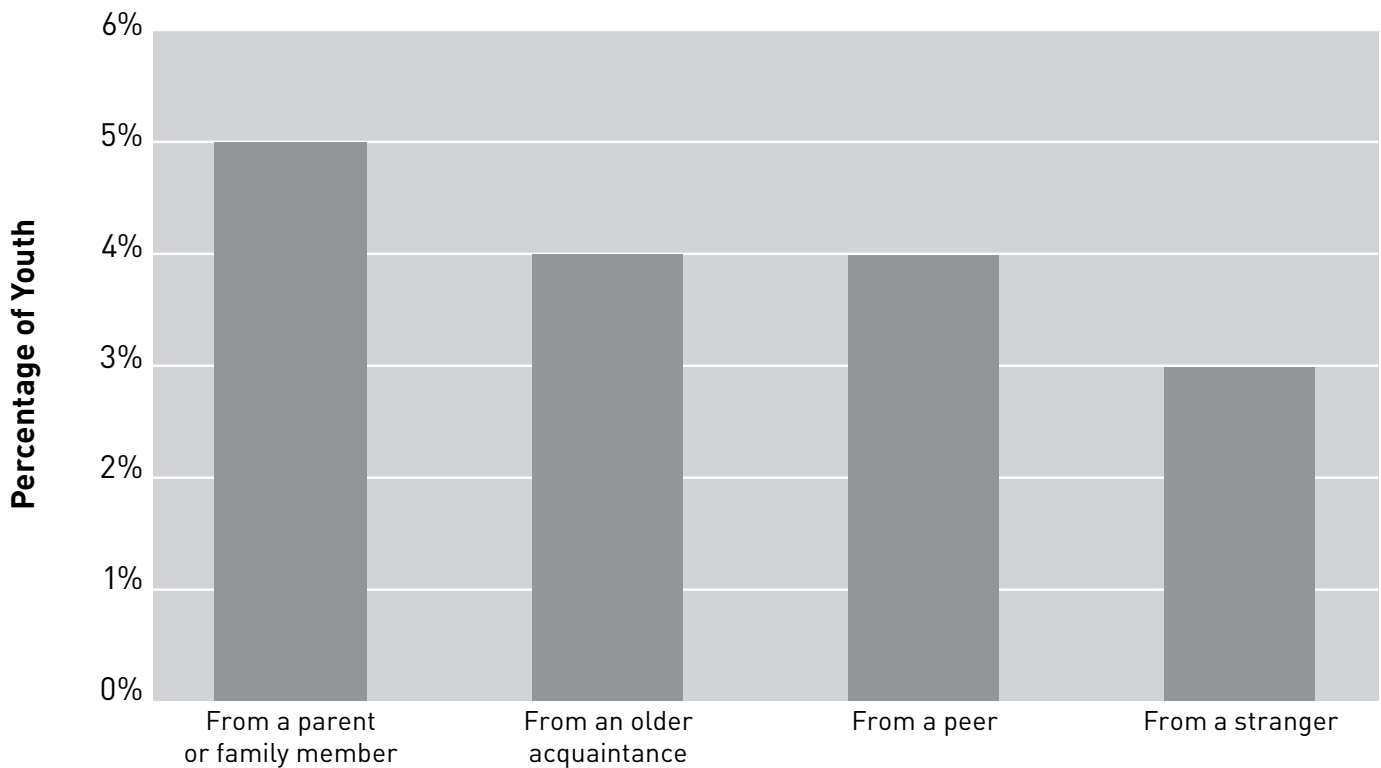
Youth who had experienced sexual violence were more likely to be female, including 79% of those who experienced nonpartner sexual violence, 70% of those who ever experienced sexual violence from a dating partner, and 53% of those experiencing sexual violence from a dating partner within the last year. The students were asked who perpetrated the sexual violence against them: a parent, other family member, older acquaintance, peer, or stranger (see Figure 3: Reported Experiences of Nonpartner Sexual Violence).

Figure 2: Overlap between Nonpartner and Partner Sexual Violence Victimization*



*Partner sexual violence questions from Dating Violence Inventory (DVI) and Family Abuse Scale, which measures violence in any dating relationship (current or past).

Figure 3: Reported Experiences of Nonpartner Sexual Violence*



*Denominator ranged from 1,284 to 1,288 students due to missing data on individual questions.

Familial Sexual Violence

A small percentage of youth (1%) reported experiencing sexual violence (sexual abuse or forced sex) perpetrated by a parent. Of these youth, the vast majority (83%) were female. An additional 4% reported ever experiencing sexual violence from a family member other than a parent, with girls representing 79%, and boys 21%. Familial sexual violence is often underreported among youth due to shame, secrecy, and sometimes threats from the perpetrators (see text box: Underreporting of Rape and Sexual Assault).

"I got molested twice by my uncle and no one knows it except a few friends and my mom."
—15-year-old female

Acquaintance Sexual Violence

Nearly 4% reported experiencing sexual violence from an older acquaintance such as a family friend, teacher, minister, or neighbor. The majority were girls (81% vs. 19% boys). Another 4% of youth reported experiencing sexual violence perpetrated by someone their own age they knew but that was not their partner.

"I was basically a victim of it. I was basically raped by my 15-year-old babysitter when I was seven..."

—15-year-old male

How Frequent Is Stranger Sexual Violence?

Of all the youth that reported sexual violence, 89% were victimized by an acquaintance, underscoring the finding that youth experienced sexual violence mostly from people they knew. Only 11% of all youth surveyed reported experiencing sexual violence from a stranger.

Underreporting of Rape and Sexual Assault

A small percentage of rape and sexual assault survivors actually report their experiences to the police and prosecute their perpetrator. A larger subset of survivors, however, tend to seek help at a rape crisis center or a medical facility, and an even larger subset will often confide in another individual; for youth, this may be a parent, a teacher, another adult, or, most often, a peer. Yet a significant number of survivors will tell no one about their assault, and while many may report their experience on an anonymous survey, not all will.

Indeed, measurement is a challenge for all surveys, but it is particularly difficult to measure and characterize incidences of rape and sexual assault across a population. Sable and colleagues (2006) explored a plethora of barriers to reporting rape and sexual assault among survivors. Most male survivors rated feelings of shame, guilt, and embarrassment as the leading barrier to reporting rape. Many men also stressed concerns about confidentiality and the fear of not being believed. Female survivors' top barriers to reporting were fears of retaliation by their perpetrator, financial dependence on their perpetrator, not wanting a family member or friend to be prosecuted, and a feeling that what they experienced was not serious enough to be considered "rape." Other common barriers to reporting include survivors' feelings of denial, self-blame, helplessness, and perhaps a previous, observed, or anticipated negative experience with reporting to a friend, counselor, and/or police officer.

These barriers are minimized in anonymous surveys, yet underreporting can still occur. One example is through the context of the survey and its impact on subjects' disclosures. In a crime survey, a survivor might be less willing to report a rape, particularly if they know their perpetrator, when the survey frames their situation as not just something that happens but as a serious criminal act. In the context of a rape and sexual assault survey, a survivor might not consider his or her own experience as fitting within the conception of a stereotypical "real rape" or "real victim" and

consequently will not report (DuMont, Miller, and Myhr, 2003).

Additionally, survivors may not feel or trust that anonymous surveys are truly confidential. If the survey is given in a classroom setting, for example, youth may fear classmates peering over and looking at their paper and, as a result, not disclose a rape or sexual assault. Youth have previous experience in writing or taking tests, having their tests or papers being read and reviewed by their teacher, and ultimately having the results of this work displayed on a final report card. Teachers often intervene when these results are considered negative or if the teacher is concerned about the student. Understandably, then, youth may not trust that a survey they fill out in school will be completely anonymous or without consequences. Thus, survivors' concerns about confidentiality and retaliation by their perpetrator never completely cease to be a barrier to reporting. Furthermore, the feelings of shame, guilt, embarrassment, fear of not being believed, denial, and/or self-blame do not simply disappear when a survivor is handed a survey, even if the survey is anonymous and conducted by outside researchers.

Finally, the nature of the relationship between survivor and the perpetrator can contribute to the level of disclosure. According to Alan Horowitz (1990), offenses that acquaintances commit do not evoke the same degree of moral outrage as offenses strangers commit, and people tend to define acquaintance violence as a private matter. Thus, subjects may not view sexual or dating violence as crimes or even problems that should be reported.

Anonymous surveys are currently the best tool available to assess rape and sexual assault within a particular population, but it is important to keep in mind that they are not perfect. Just as experiences of sexual violence are incredibly complex and traumatic for survivors, the decision to report and how to report such an experience is, likewise, far from simple.

Youth Voices:

How Has Sexual Violence Affected You?

"I hate hearing about rape. How could a person do such a horrible thing to another person? Rape is horrible."

—13-year-old female

"It has made me a very sad and depressed person. I have trouble trusting."

—17-year-old female

"It has changed me and has hurt me a lot emotionally."

—16-year-old male

"It makes me suffer. All it does to me is that it makes me feel less okay as a person."

—14-year-old female

"Well for two years I couldn't dress or act the same as I used to because of sexual violence."

—18-year-old female

"It makes me think that a lot of men can't be trusted."

—14-year-old female

"In many ways like sexually and abuse [has affected] my life because I'm afraid to connect with my partners."

—16-year-old female

"It gets me upset and feel like hurting the person."

—17-year-old female

"It has made me depressed and I shut out from everyone (secretive)."

—16-year-old female

"I think it made me stronger. Because even though it's in the past and I carry that throughout my whole life, I don't let that stop me."

—15-year-old female

"I feel that it is too fuckin' horrible and that if I am walking down the street and a guy is sexually abusing a girl, I would kill him."

—15-year-old male

"It has made me want to change my sex."

—14-year-old female

"It changed my behavior toward my boyfriend now because I experienced violence and sexual violence with my ex-boyfriend."

—17-year-old female

"I ask my partner questions and tell him over and over what I have been through."

—17-year-old female

"It has affected me very much because it is something I can't forget."

—18-year-old female

"It made me feel so bad about myself that I tried suicide."

—16-year-old female

"Now I know how cruel people can be when they take you for granted and do sexual things to you without your okay to it..."

—17-year-old female

"It didn't affect me. I just blank it out."

—17-year-old female

Revictimization and Continuous Abuse

Youth who experience sexual violence are at increased risk for ongoing violence or revictimization. Of those reporting nonpartner sexual violence, 40% (or one in three) reported experiencing the abuse more than once, and 19% experienced the abuse on three or more occasions. Youth who experienced sexual abuse from a family member other than a parent were the most likely to report ongoing sexual abuse.

Nonpartner Sexual Violence Is an Associated Factor for Dating Violence Victimization and Perpetration

Among youth who reported nonpartner sexual violence, 19% also reported sexual violence from an intimate partner at some point in their lives. Some youth with a history of nonpartner sexual violence also experience physical violence from a dating partner. Using logistic regression, controlling for age and race/ethnicity, the study found that males who had been a victim of nonpartner sexual violence were three-and-a-half times more likely to experience physical dating violence than males who had not. Similarly, females who had experienced nonpartner sexual violence were nearly three times more likely to experience physical dating violence than females without that experience.

A history of nonpartner sexual violence is an associated factor for perpetration of physical violence in a dating relationship. Girls with a history of nonpartner sexual violence were more than two times more likely to perpetrate physical violence against their dating partner. Likewise, boys who have experienced sexual violence were almost four times more likely to perpetrate physical violence against their partner than boys who did not have this history.

Experiencing nonpartner sexual violence was an associated factor for perpetrating sexual dating violence. This study found that males with a history of nonpartner sexual abuse are nearly four times more likely to perpetrate sexual dating violence in their relationships.

Youth-Produced Documentary: *It's Not about Sex*

"Before I never really thought about sexual violence because I didn't really care about it. But since sexual violence was chosen as a topic for our video, now I kind of think that men can stop sexual violence. And it's not about the way someone is dressing that makes you want to do that to them; it's what's inside of you. It's really who you are."

—David Brice, Brooklyn International High School

"My perspective on sexual violence has definitely changed. Doing this documentary has opened my eyes, and I no longer have the mentality of oh, it won't happen to me. I think everyone is at risk, and producing this documentary has made me more aware."

—Sara Siddique, City-As-School, Brooklyn

In 2007, thirteen NYC high school students developed a documentary called *It's Not about Sex* highlighting the prevalence of sexual violence. The youth produced the documentary through a course organized by the Education Video Center (EVC). The EVC is a nonprofit youth media organization dedicated to teaching documentary video as a means to develop the artistic, critical literacy, and career skills of young people, while nurturing idealism and commitment to social change. Founded in 1984, the EVC has evolved from a single video workshop for teenagers from Manhattan's Lower East Side to become an internationally acclaimed leader in youth media and education. One of the EVC's four core programs is Documentary Workshop, a 15-week credit-bearing course that teaches high school students from underserved communities across New York City to research, shoot, and edit compelling documentaries that examine issues of immediate relevance in their lives. In the spring of 2007, thirteen NYC high school students in Doc Workshop produced a documentary called *It's Not about Sex*.

It's Not about Sex takes a fresh look at the prevalence of sexual assault in contemporary society. The New York City Alliance Against Sexual Assault provided assistance to teen producers—who were shocked by the statistic that more than half of all rapes happen to people under the age of 18—to

search for the roots of the violence. They examine why many survivors of sexual crimes are afraid to report them. On their journey to understand this complex issue, they talk to people from all walks of life, from sex crimes prosecutors and antirape activists, to people in the sex industry. Producers challenge their own assumptions, while calling for society to take prevention seriously at an earlier age.

The EVC multiplies the impact of the videos by showcasing them in schools and community centers, as well as through film festivals and broadcast opportunities. Screenings include youth-led discussions with the audience, designed to engage participants in becoming involved in social change.

Before the film was finalized, the Alliance held a screening to provide feedback to the student producers, inviting several individuals and organizations in the field. The students received helpful advice to finalize their documentary, met key people, and were encouraged by fellow activists and organizers to further their campaign to take action against sexual violence. The EVC partnered with the Alliance to use *It's Not about Sex* to encourage youth to participate in the Alliance's Sexual Assault Yearly Speak Out (SAY SO!) and to promote the NYC Teen Health Map. They also worked together on a study guide that goes with the documentary: www.evc.org/store/videos/study-guides/its-not-about-sex-study-guide.

Since the completion of the film, youth producers of *It's Not about Sex* have continued to use their documentary to raise awareness about these issues and to inspire diverse audiences to take action. Youth producers were interviewed for a story written in the winter 2008 edition of *Sex, Etc.*, the teen destination for real, honest sexual health information, published by Answer, at Rutgers University. The Young Adult Library Services Association (YALSA) of the ALA chose the documentary for its Notable List of DVD and Videos for Young Adults in 2008.

To watch a clip of *It's Not about Sex* or for more information, go to the EVC's Website:

www.evc.org

How has dating violence affected you?

*“It makes me feel like if you are in love
you are trapped sometimes.”*

—16-year-old female

Chapter 3: Dating Violence

Dating violence is a hidden epidemic among youth in New York City. This chapter covers current literature on the prevalence of both physical and sexual dating violence. Findings from *Partners and Peers* are presented, including data on perpetration and victimization.

Dating Violence: What Other Studies Show

Dating violence can take many often-interconnected forms: sexual, physical and/or emotional. Teen dating violence prevalence estimates range from 9%–60%, including verbal, physical, and sexual violence (Cohall, Cohall, and Bannister, 1999). According to the U.S. Department of Justice, females ages 16 to 24 are more vulnerable to relationship violence than any other age group (Bureau of Justice Statistics, 2001).

According to the Centers for Disease Control Youth Risk Behavioral Surveillance System (YRBSS), each year, one in 11 adolescents reports being a victim of physical dating aggression (CDC, 2006). In a study of 635 high schools students, researchers found that 36% of teenage girls and 37% of boys reported receiving some form of physical aggression from a dating partner at least once (Molider and Tolman, 1998). Furthermore, by the time they are in high school, 54% of students report dating violence among their peers (Jafe *et al.*, 1992).

Often those studying dating violence do not include sexual violence. A study of the effects of teen dating violence on high school females found that one in five experienced either physical and/or sexual violence in their relationships (Silverman *et al.*, 2001). Teenage girls in heterosexual relationships are much more likely than teenage boys to suffer from sexual victimization (Jezl, Molider, and Wright, 1996).

What This Study Measured

This study asked questions about *lifetime* victimization of physical and sexual violence and *current* victimization and perpetration of dating violence. The report applied two validated scales to measure dating violence: the Conflict in Adolescent Dating Relationships Inventory (CADRI) and the Dating Violence Inventory (DVI) and Family Abuse Scale (see, for more information, Appendix A, on page 75).

The CADRI assesses the frequency of current or recent dating violence behaviors that happened during a conflict or argument with a dating partner at some point in the last year. The CADRI asks about victimization *and* perpetration behaviors.

For current partner sexual violence the study asked sets of three questions.

During a conflict or argument with my partner in the past year:

- I touched him or her sexually when he or she didn't want me to.
- She or he touched me sexually when I didn't want him or her to.
- I forced him or her to have sex when she or he didn't want to.
- She or he forced me to have sex when I didn't want to.
- I threatened him or her in attempt to have sex with him or her.
- She or he threatened me in an attempt to have sex with me.

For current partner physical violence the study asked sets of five questions.

Theories of Teen Dating Violence

Many researchers have sought to explain why violence occurs and persists in the context of intimate relationships. In light of gender, demographic, historical, and psychological factors, a variety of theories concerning dating and domestic violence exist. Indeed, many adolescents and young adults have observed, experienced, and/or perpetrated such violence, a fact that is particularly relevant, since it is during these formative, first relationships that youth establish habits and patterns that often persist into adulthood (Werkele and Wolfe, 1999).

Feminist theorists attribute dating and domestic violence to their context within a patriarchal society. Studies show that gender matters in cases of sexual violence; males holding traditional, male-dominated gender views are more likely to be perpetrators of violence, and females with traditional views are more likely to be victims. However, other studies have shown females are more likely than males to inflict nonsexual violence, though motives for this violence often vary by gender (Foshee, 1996).

Social learning theory applies to both males and females, focusing on the impact of observing domestic or dating violence at home during adolescence. According to the theory, adolescents that observe violence among parents interpret violence as an action that is accepted in the context of an intimate relationship, and interpret violence as a legitimate behavior in response to another's wrongdoing. Adolescents then interpret abuse and violence as "positively functional" while simultaneously failing to observe the effectiveness of other, nonviolent forms of problem-solving. Furthermore, adolescents see that those who employ violence are not punished. According to Albert Bandura (a pioneer of social learning theory), as adults, individuals will apply these abstract rules and principles learned during adolescence (Bandura, 1973; and Bandura, 1977).

Yet, social learning theory does not completely explain dating and domestic violence, since not all children who observe violence become perpetrators or victims, while some children who do not

observe violence at home nevertheless are perpetrators and/or victims of violence in their young adult and adult relationships. Indeed, given that family units do not exist in a vacuum, researchers have explored the role and impact of an individual's broader community and society. One study theorized that one's observations and experiences with their friends are more influential than any parental violence they observe or experience (Arriaga and Foshee, 2004). Another study hypothesized that individuals of lower socioeconomic status tend to have fewer resources with which to exert power in a relationship, such as money or prestige, and thus resort to violence (Holtzworth-Munrow and Stuart, 1994). Finally, many explain dating and domestic violence as part of a broader "culture of violence," in which violence observed within a small community or in the media causes many to believe violence is accepted, or at the very least, effective. Indeed, studies have shown that various forms of violence are correlated with each other and also related to, though not necessarily caused by, an individual's general patterns of low self-esteem, emotional disengagement, and antisocial behavior (Donovan and Jessor, 1985).

Researchers not only have hypothesized why domestic and dating violence emerge, but have sought to explain why such violence continues. Some theorize that many remain in abusive relationships in hopes of a return to the "honeymoon" or "make-up" phase of the relationship. Others may choose to accept abuse due to a feeling there is simply no possibility of escape. Stockholm syndrome occurs when victims feel a particular bond to their captor/abuser, due to their isolation from other normal relationships (Center for Problem-Oriented Policing, 2006). Finally, many choose to remain in abusive situations due to social and cultural factors; a victim may not merely face retaliation by his or her perpetrator, but may also often face social risks, such as isolation from the community (Bograd, 1999).

During a conflict or argument with my partner in the past year:

- I threw something at him or her.
- She or he threw something at me.
- I threatened to hurt him or her.
- She or he threatened to hurt me.
- I kicked, hit, or punched him or her.
- She or he kicked, hit, or punched me.
- I pushed, shoved, or shook him or her.
- She or he pushed, shoved, or shook me.
- I slapped him or her or pulled his or her hair.
- She or he slapped me or pulled my hair.

To examine whether youth had ever experienced dating violence from any partner, this study used the Dating Violence Inventory (DVI) and Family Abuse Scale, which asked two questions about sexual violence and five on physical violence.

How often in your life has any (current or previous) partner ever:

- Tried to force you into sexual activity?
- Raped you?
- Pushed or shoved you?
- Slapped or hit you?
- Punched you?
- Choked you?
- Hurt you with an object or weapon?

Partners and Peers: Research Findings

Links between Forms of Dating Violence Victimization

There is tremendous overlap between the various forms of dating violence. In this study, 71% of youth who experienced threatening behaviors from a dating partner also experienced physical aggression from that dating partner. Likewise, 63% of youth who reported experiencing sexual violence from their dating partner also experienced physical dating violence from that same partner.

Physical Dating Violence Victimization from Any Partner

This study asked youth how often any current or previous partner had ever hurt them physically. Among students with a dating history, more than half (56%) reported physical dating violence during a conflict or argument at some point in their lives. Among youth with a dating history, more than one-quarter (27%) reported ever being pushed or shoved by a dating partner and 17% reported being slapped or hit. Fifteen percent of youth reported that a boyfriend or girlfriend threw objects at them and 11% said that a dating partner punched them. Youth also reported experiencing very serious and potentially lethally violent behaviors from a dating partner, with 8% reporting a history of partner-choking, and 3% reporting a current or previous partner had hurt them with an object or weapon.

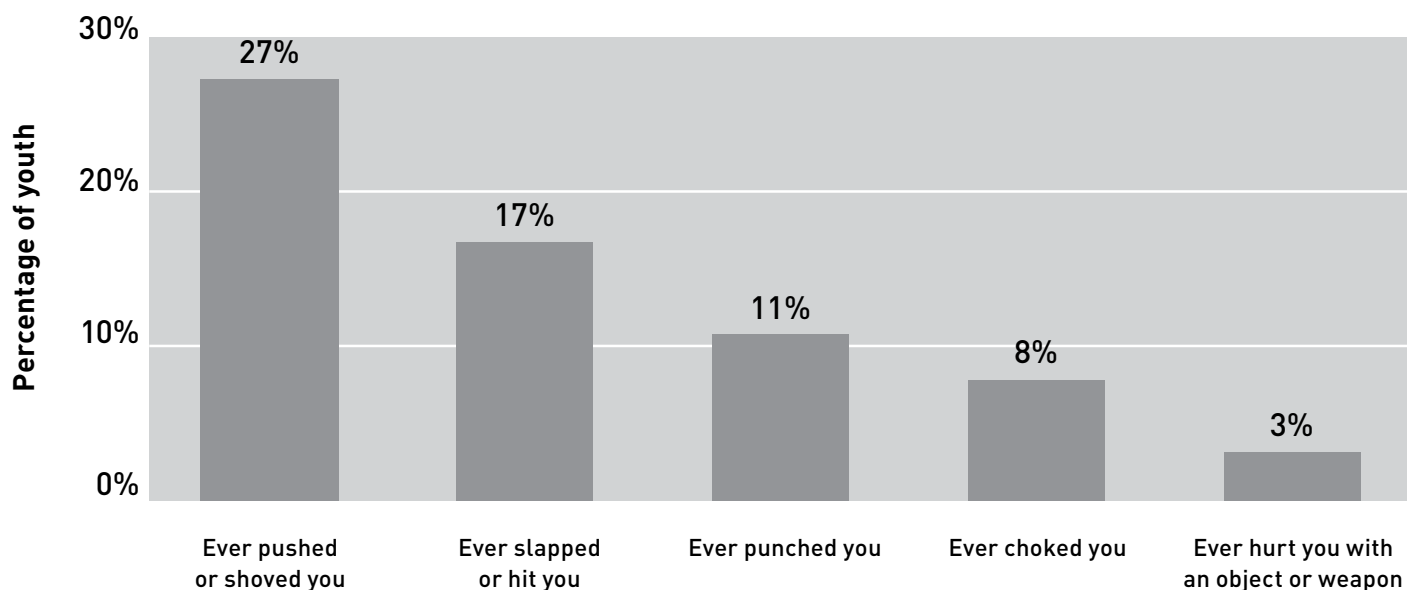
Physical Dating Violence Victimization from Current Partner

Many youth surveyed reported physical violence from a dating partner within the past year. The study asked youth if, during a conflict or argument with their partner during the past year, she or he threw something at them, kicked, hit, punched, pushed, shoved, shook, slapped them, or pulled their hair. Almost 30% of youth reported experiencing one of these behaviors and 32% reported that they had perpetrated at least one of these physically violent behaviors (see Figure 5: Youth Self-Reported Behavior and Experiences of Dating Violence).

“My mother went through it and I swore I won’t let myself become just another statistic.”

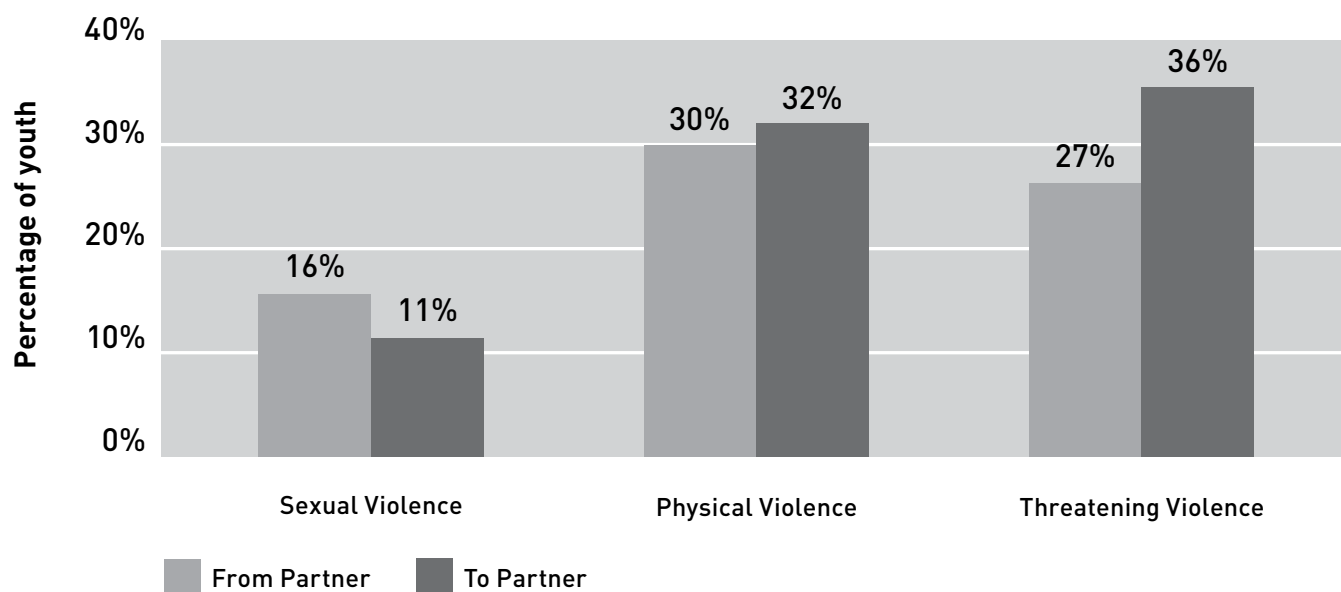
—17-year-old female

Figure 4: Percentage of Youth that Report Ever Experiencing Physical Dating Violence*



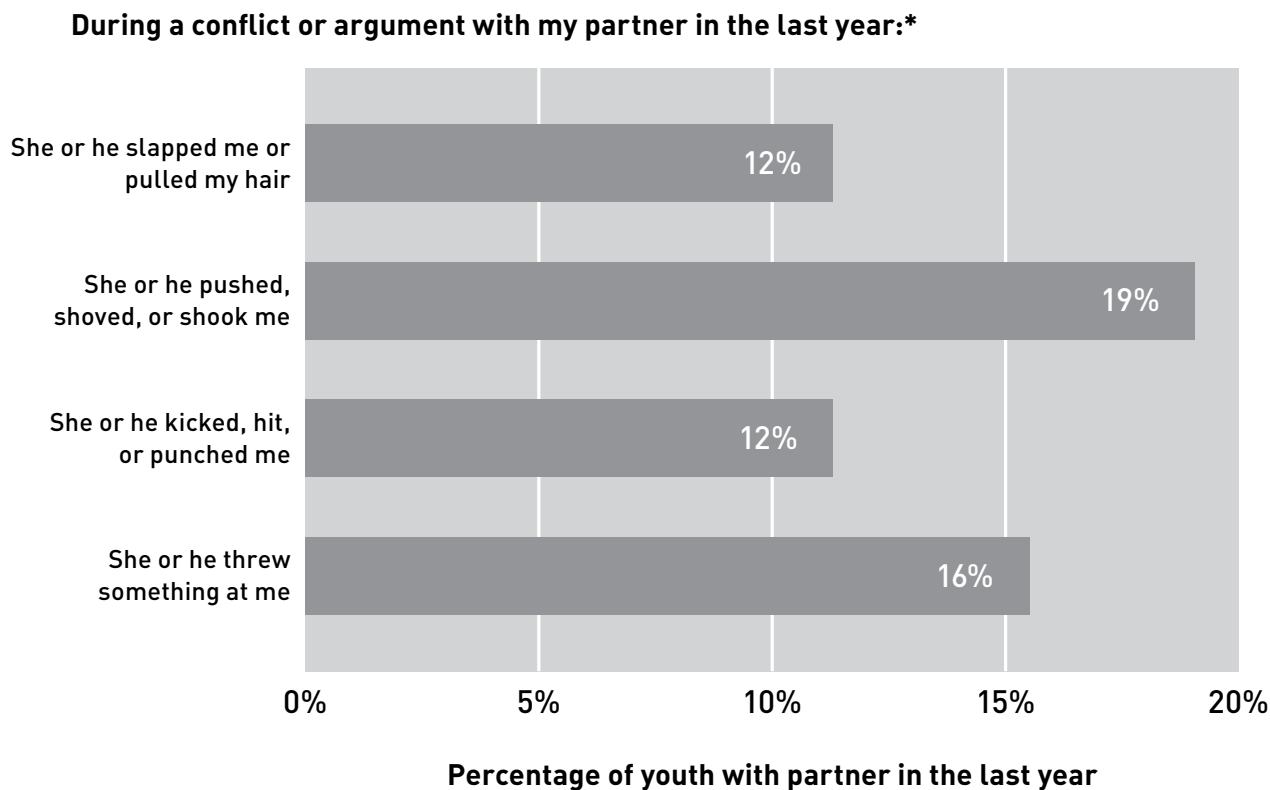
*Denominator based on (1,017) youth who had started dating or had any romantic and/or sexual relationship. The questions are from the Dating Violence Inventory (DVI) and Family Abuse Scale.

Figure 5: Youth Self-Reporting Behavior and Experiences of Dating Violence*



*Denominators based on (883) youth who reported having a partner within the last year. The scales are from the Conflict in Adolescent Dating Relationship Inventory (CADRI). The sexual violence scale is based on three questions and excludes forced kissing.

Figure 6: Percentage of Youth Who Report Experiencing Physically Violent Behaviors in Their Current Dating Relationship



*Denominators based on (883) youth who reported having a partner within the last year. The scales are from the Conflict in Adolescent Dating Relationship Inventory (CADRI). The sexual violence scale is based on three questions and excludes forced kissing.

During the past year, 19% of youth reported that their partner pushed, shoved, or shook them during a conflict or argument, 16% of youth reported their partner threw something at them, and 12% reported their partner slapped them or pulled their hair during a fight. More than one in ten students (12%) reported that their boyfriend or girlfriend kicked, hit, or punched them at least once during the past year during a conflict or argument. Seventeen percent of youth report being afraid of their partner when they argue or when they do something their partner doesn't like. Of these youth, 16% report being "quite a bit" or "very afraid" of their partner.

Physical Dating Violence Perpetration against Current Partner

Physical dating violence is not one-sided; many youth also report *perpetrating* physical violence against their partners. Approximately 32% of students reported perpetrating one or more episodes of physical violence against their partners in the past year. During a conflict or argument in the last year, 17% of youth reported that they kicked, hit, or punched their partner. Another 21% reported they pushed, shoved, or shook their partner at least once during a fight within the last year.

Threatening Behaviors from Any Partner

Similar to the mechanisms of control behind physical and sexual violence, many youth report experiencing nonphysical threatening behaviors from a dating partner. In this study, 12% of youth reporting that a partner ever threatened to hurt them. Another 4% of students reported that a partner (current or past) threatened to hurt them with a weapon.

Threatening Behaviors from Current Partner

The threatening behaviors are also occurring in current or recent relationships with slightly more than 17% of youth reporting their current or recent dating partner threatened to throw something at them during a conflict or argument, and four in

ten of these youth (42%) reported this happened to them three or more times during the past year. Nearly one in ten youth reported that their partner destroyed or threatened to destroy something they value during a fight. In addition, 10% of youth reported that their partner threatened to physically hurt them.

Sexual Dating Violence Victimization from Any Partner

Among students with a dating history, almost 10% reported experiencing sexual victimization by a romantic partner. Seventy-nine students surveyed (9%), reported that any dating partner (current or past) tried to force them into sexual activity. A smaller percentage, 3%, reported a history of forced sex by a partner.

Table 2: Youth Self-Reported Frequency of Physical Dating Violence Victimization and Perpetration within the Past Year

Physical Violence*	Never	Seldom (1–2 times)	Some (3–5 times)	Often (6+ times)
She or he threw something at me	84%	10%	4%	2%
She or he kicked, hit, or punched me	88%	6%	3%	2%
She or he pushed, shoved, or shook me	81%	12%	4%	2%
She or he slapped me or pulled my hair	88%	7%	3%	2%
<i>I threw something at him or her</i>	82%	10%	5%	3%
<i>I kicked, hit, or punched him or her</i>	83%	9%	5%	3%
<i>I pushed, shoved, or shook him or her</i>	79%	10%	8%	3%
<i>I slapped him or her or pulled his or her hair</i>	83%	10%	5%	2%

*Denominators based on youth who reported having a partner within the last year, and ranged from 840 to 883 for the questions about their partner's behavior and from 842 to 883 for their own behavior; ranges due to missing data on individual questions. The questions are from the Conflict in Adolescent Dating Relationship Inventory (CADRI).

Youth Voices:

How Has Dating Violence Affected You?

"Dating violence affected me emotionally when I was in a past relationship."

—16-year-old female

"It has somewhat because of the fact that I know my father used to abuse my mother."

—18-year-old male

"I'm paranoid that my partner or anyone just might try to hurt me."

—17-year-old female

"I haven't been in an unsafe relationship that was seriously unsafe, just one or two events with one partner that I felt unsafe. But I see in other people's relationship and if my friends go through it, it hurts."

—16-year-old female

"When I see someone getting abused I think it is wrong."

—13-year-old male

"I was in a violent relationship a long time ago and I think it made me less trusting in people."

—18-year-old female

"It educates me on how respectful you have to be with your partner."

—14-year-old male

"It has affected me very negatively. It has made me very sad and afraid. I have found it much harder to trust people."

—17-year-old female

"It has made me treat women better."

—16-year-old male

"You can say that it has made me a little scared of my partner and when we have fights I try to keep distance."

—17-year-old female

"I don't like to be around my partner because I believe that we may engage in physical violence."

—16-year-old male

"A lot because I don't believe in guys now and it is hard for me to get in a relationship with someone."

—17-year-old female

"Dating violence affected me because now I say to myself I shouldn't be in a serious relationship."

—18-year-old male

"Yes because it happened to my mother. The violence happened in front of me. Now I know what it is like."

—17-year-old female

"It affected the way she thought about me."

—15-year-old male

"In a way it makes me not wanna take a relationship seriously."

—17-year-old female

"It has affected me because I know some people my age that are in a violent relationship and it bothers me a lot."

—17-year-old male

Sexual Dating Violence Victimization from Current Partner

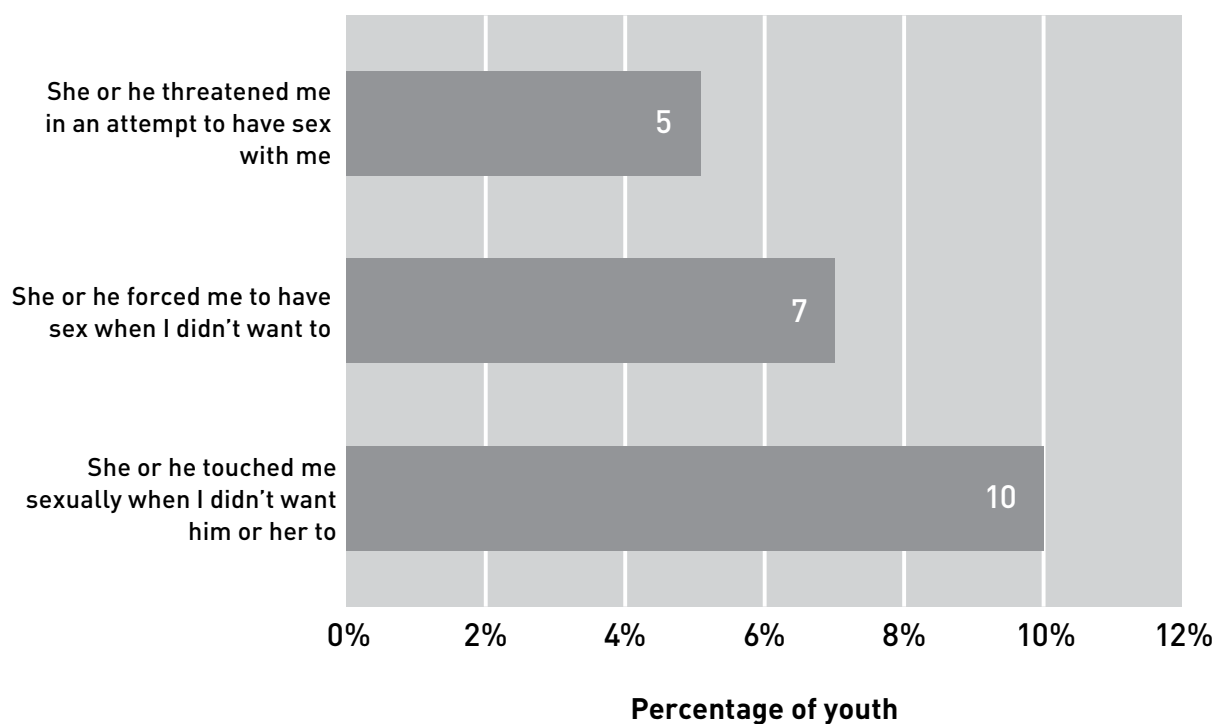
One in 20 youth (5%) reported their partner threatened them in an attempt to have sex, and an additional 7% said their dating partner forced them to have sex when they didn't want to at some point in the last year. Furthermore, nearly one in ten youth reported that their dating partner had touched them sexually within the past year when they didn't want him or her to.

Sexual Dating Violence Perpetration against Current Partner

This study asked students about their own perpetration of sexual violence in dating relationships. Seven percent of youth said they touched their partner sexually when their partner did not want them to. Another 4% reported forcing their partner to have sex against their will.

Figure 7: Percentage of Youth Who Report Experiencing Sexually Violent Behaviors in Their Current Dating Relationship

During a conflict or argument with my partner in the last year:*



*Denominators based on youth who reported having a partner within the last year, and ranged from 825 to 838; ranges due to missing data on individual questions. The questions are from the Conflict in Adolescent Dating Relationship Inventory (CADRI).

Fear as an Associated Factor for Current Dating Violence Perpetration and Victimization

This study asked students about the presence of fear in their dating relationships. Of the students surveyed, 20% of young women and 19% of young men are afraid of their partner, while 19% of young women and 24% of young men think their partner is afraid of them. In terms of bidirectional fear, 20% of young women who are afraid of their partner think their partner is afraid of them, whereas 13% of young men who are afraid of their partner think their partner is afraid of them.

As expected, the study found that when fear is present in dating relationships (whether it is bidi-

rectional or felt only by the victim), there is a higher rate of violence. Though fear is an associated factor for violence perpetration and victimization, this study cannot determine which comes first—fear or violence, because it is asking both questions at the same time, a cross-sectional approach.

How has dating violence affected you?

“I suppose I’m more paranoid around some people, especially when I anger them, and I cringe a lot more and try to protect myself whenever he yells, expecting worse.”

—17-year-old female

Table 3: Youth Self-Reported Frequency of Sexual Dating Violence Victimization and Perpetration within the Past Year

Sexual Violence*	Never	Seldom (1–2 times)	Some (3–5 times)	Often (6+ times)
She or he touched me sexually when I didn’t want him or her to	90%	6%	3%	1%
She or he forced me to have sex when I didn’t want to	93%	4%	2%	1%
She or he threatened me in an attempt to have sex with me	95%	3%	2%	1%
<i>I touched him or her sexually when she or he didn’t want me to</i>	93%	4%	2%	1%
<i>I forced him or her to have sex when she or he didn’t want to</i>	96%	2%	1%	1%
<i>I threatened him or her in an attempt to have sex with him or her</i>	96%	2%	1%	1%

*Denominators based on youth who reported having a partner within the last year, and ranged from 840 to 883 for the questions about their partner’s behavior and from 842 to 883 for their own behavior; ranges due to missing data on individual questions. The questions are from the Conflict in Adolescent Dating Relationship Inventory (CADRI).

Table 4: Controlling Behaviors Experienced by Youth

Controlling Behaviors*	
By a partner within the last 12 months...	
She or he kissed me when I didn't want him or her to	32%
She or he kept track of who I was with and where I was	59%
She or he tries to keep me from seeing my friends	20%
She or he tries to restrict contact with my family	6%
She or he insists on knowing where I am at all times	48%
She or he ignores me and treats me indifferently	19%
She or he gets angry if I speak to another man or woman	46%
She or he checks my cell phone to see who I have called	43%
She or he checks my email	21%
By any partner (current or past)...	
Ever made decisions for you	29%
Ever acted extremely jealous	52%
Ever insulted your family	15%
Ever insulted your friends	33%
Ever humiliated you in private	19%
Ever humiliated you in public	16%

* First half of table utilizes denominators based on youth who reported having a partner within the last year, and ranged from 838 to 881; ranges due to missing data on individual questions. These questions are from the Conflict in Adolescent Dating Relationship Inventory (CADRI). The second half of the table utilizes denominators based on youth who reported ever having a partner and ranged from 1,005 to 1,012, with ranges due to missing data on individual questions. These questions are from the Dating Violence Inventory (DVI) and Family Abuse Scale.

Marie's Story*

When I was thirteen, I began dating a childhood friend, a boy I had known since kindergarten. He was my first boyfriend, but more important, he was my best friend. My relationship with him gave me a feeling of security that I could not find anywhere else. Like a lot of teens, I was insecure. I had very little self-confidence, and I wanted nothing more than to feel accepted by my peers. It was with him and only him that I felt as if I could open up and be myself.

A few months after we began dating, I found out that my boyfriend had been dealing with a lot of problems at home. We had grown very close, and I found out that he had been physically abused as a young child by his father. His mother had taken him and left his father while he was still a little boy.

He had taken to drinking at that early age, and what other kids saw as cool had started to frighten me. I noticed changes in his personality when he would drink. He would get angry. There were times when he would threaten to kill himself, telling me that I was the only person that was keeping him from doing so. He attempted suicide twice while we were dating. I grew to feel hugely responsible for his wellbeing. I was in constant fear that I could not protect him.

Eventually, he grew violent with me. He had taken me to a party once. I found myself feeling particularly shy, unable to speak to anyone. I wanted desperately to leave. When I told him this, he grabbed my arm, pulling me into the bathroom. I felt my back thrust to the wall, and it seemed instantaneous that his fists were driven into my stomach, my sides, and my shoulders. I fought back tears that night, but I was unable to walk away.

This wasn't the first or last time that he had been violent toward me. I never told anyone about it as it was going on. I began to grow more and more withdrawn from my friends and family. They noticed that I wasn't myself, and they expressed concern, but I could never bring myself to let them know what was going on.

I am asked sometimes why I never told anyone—why I didn't just get help. In my head, I knew that he was wrong for hitting me. I knew that if I had told someone that it would probably stop one way or the other. But as I went through this experience, I found it easier to make excuses. I told myself that I knew he was sorry. In my head, I did not want to get him into

trouble. I did not want to go to the police or have him get "caught by the police." I would remind myself that he was dealing with a lot of hurt. I wanted to maintain his trust and to support him. I wanted him to believe I loved him. I was constantly scared that he would commit suicide.

I spent a lot of time in my life in a lot of pain. I had been diagnosed with anxiety. I spent many nights unable to sleep. I wanted to hide my experiences. I had always felt that women who stayed in abusive relationships were weak. I did not want to be considered that way. As a high school student, I became one of those "overachievers." I took only AP/Honors-level courses in school. I joined five or six activities after school. I wanted to keep myself busy, so that I would never have to confront what was happening to me.

The physical violence ended when his family moved across the country. I still spoke to him on the phone, and still bore the weight of feeling responsibility for his wellbeing. He committed suicide about five months after that move.

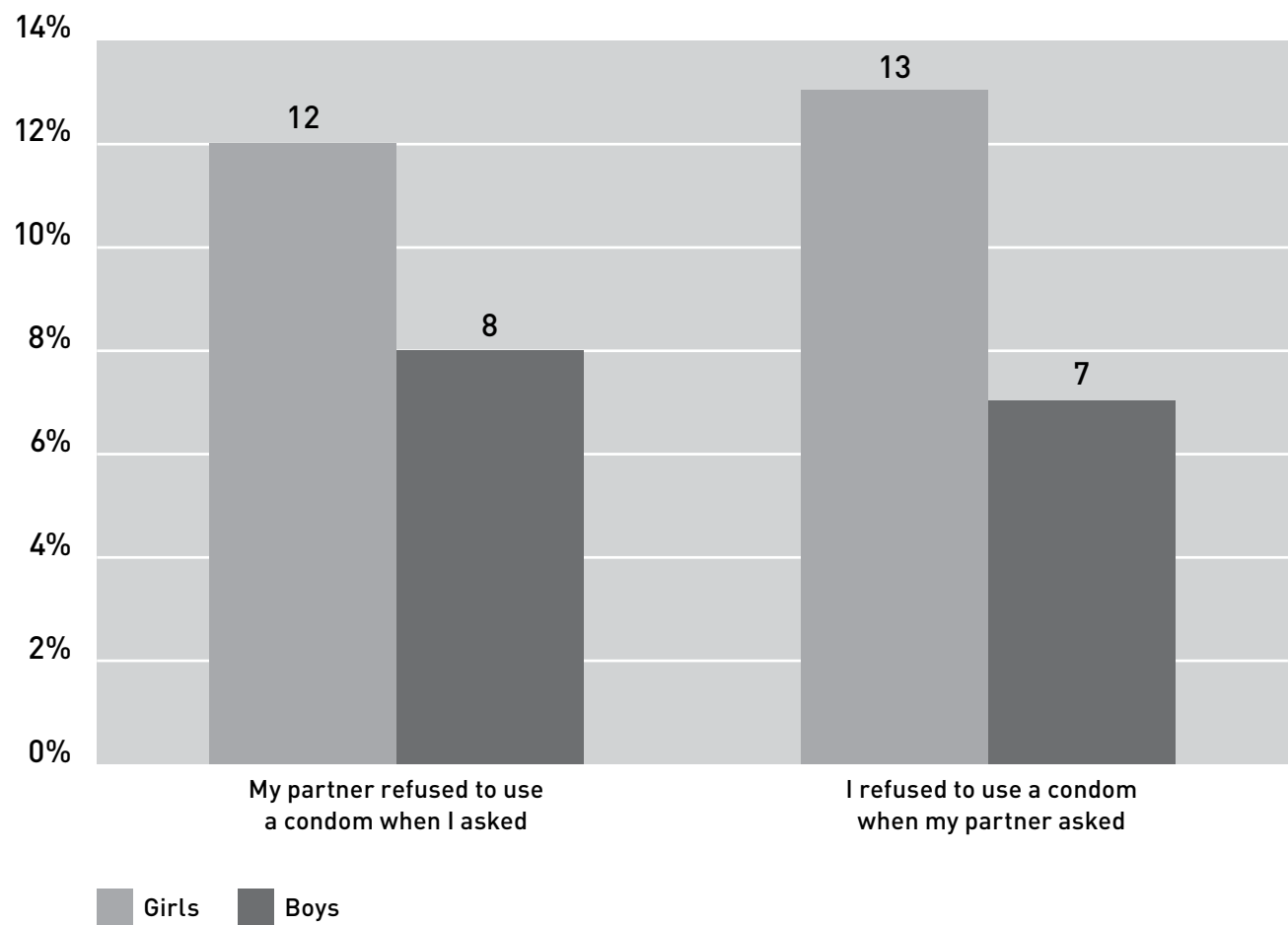
The first person I told was my college advisor. She was the first person to ever tell me that I was not to blame for this experience. She was the first person who ever pushed me to confront the experience, to understand it. It was the first step in my process of healing.

Eventually, I confided in my family, as well. They surprised me with their amount of support. They were shocked, but, at the same time, expressed how proud they were of my accomplishments in life and how that would never have changed. It showed me how much it means to have the community of support around me that my family has always given me. I had never told them, afraid I would have disappointed them in making the wrong choices.

I usually have one message for young people who may go through something similar: You are not alone. I have come to understand over the past few years how prevalent of a problem teen dating violence truly is. When I look back at my own situation, I always believed that I was alone. I believed that my situation was different. I wanted to feel as if I was doing the right thing by letting myself stay in the abusive relationship. What I know now is that if I had known I wasn't alone, I may have been able to help him and to help myself.

*Name changed to protect confidentiality.

Figure 8: Percentage of Youth Who Report Sexually Coercive Behavior with Condom Use*



*Denominators based on youth who reported having a partner within the last year.
Total was 516 youth, due to missing data on these individual questions.

Controlling Behaviors from Any Partner

In addition to violence and threatening behaviors, many youth reported being controlled by their dating partner. Controlling behaviors include monitoring a partner's behavior, insulting a partner's friends or family, and trying to restrict a partner's movement or interaction with support networks. Among the youth surveyed, 19% reported that a partner humiliated them in private, and 16% reported humiliation in public.

Many youth also reported experiencing controlling behaviors that limited or changed their interactions with family and friends. In fact, almost 15% of the students reported a partner insulted their family, and one-third (33%) reported that their partner insulted their friends.

Controlling Behaviors from Current Partner

Nearly 6% of students reported that a partner tried to restrict their contact with family at some point in the past year, and one in five students reported that a current or recent partner has tried to keep them from seeing friends.

Monitoring is a specific form of controlling behavior. In this study, nearly half of all youth (48%) said their current or recent partner insists on knowing where they are at all times. Another 43% of students say their partner checks their cell phone to see who they called, with more than half of these students (56%) saying this happens "sometimes" or "often."

Twenty-one percent of students report their partner checks their email, and 46% of youth report their current partner gets angry if they speak with another person of the opposite sex.

Many youth also experience sexual coercion and control related to the use of condoms during sex. Nearly one in five youth reported their partner refused to have sex using a condom, even when requested, with 12% of girls and 8% of boys reporting partner refusal. Likewise, a similar percentage of youth (20%) report they have refused to have sex using a condom—even when their partner asked them—with more girls (13%) than boys (7%) reporting refusal.

How has dating violence affected you?

“It has affected me because if my man hits me it makes me feel low and like a piece of garbage. Then I get reactive, get mad tough, and start fighting with anyone.”

—15-year-old female

Chapter 4: Intersections of Violence

Youth experience a range of violent behaviors during their lives and therefore it is important to examine the intersections of dating and community violence. This chapter examines the links between dating violence and other violent behaviors and experiences commonly reported by youth.

Dating Violence and Community Violence: Literature Review

Youth experience and are exposed to a wide range of violence, especially in urban settings. According to the 2007 NYC Youth Risk Behavior Survey (YRBS), 34% of students reported involvement in at least one physical fight in the past 12 months and 12% of students carried a weapon such as a gun, knife, or club on one or more of the past 30 days (NYC DOHMH, 2008). In addition, 7% of students did not go to school on one or more of the past 30 days because they felt unsafe at, or on their way to or from, school (NYC DOHMH, 2008). Both males and females in lower grades reported carrying a weapon more than youth in the higher grades (13% of ninth grade students vs. 9% of twelfth grade students). Furthermore, younger students also report more involvement in physical fights (34% of ninth grade females vs. 20% of twelfth grade females and 43% of ninth grade males vs. 31% of twelfth grade males) (NYC DOHMH, 2008).

Specific types of violence are unlikely to occur in complete isolation; for example, researchers found that adolescents who reported being abusive or violent in the past year, reported greater episodes of perpetration and victimization of dating violence and peer violence (Bossarte, Simon, and Swahn, 2008). Finkelhor and colleagues have explored the intersections of various types of victimizations on children and youth. Finkelhor argues that the research and practice fields have adopted a “fragmented” approach that explores specific victimizations in isolation and ignores the interrelationships

of these experiences. He argues for an examination of “polyvictimization,” or multiple victimizations across a range of crimes, including dating violence, child sexual abuse, familial violence, peer violence, as well as witnessing and other forms of indirect violence (Finkelhor *et al.*, 2005; Finkelhor, Ormrod, and Turner, 2007a).

In a national study, these researchers found a significant overlap between victimizations; that is, children and youth with a history of *any* sexual victimization were very likely (97%) to have additional victimizations. This includes, especially, an assault (82%), witnessing the victimization of another person, or being exposed to victimization directly (84%) (Finkelhor *et al.*, 2005). This category includes youth who have witnessed domestic violence, the physical abuse of a sibling, an assault (with or without a weapon), murder, a riot or other civil disturbance where shooting and/or bombing occurred, or had been in a war zone. This examination of polyvictimization allows for a better understanding of trauma symptoms and the need for broader prevention programming (Finkelhor, Ormrod, and Turner, 2007b).

Studies are also beginning to show the links between dating violence and other types of peer violence in terms of perpetration *and* victimization. In a study of Latino youth in Washington, DC, researchers found that youth who reported carrying a gun or involvement in physical fights were at increased odds of reporting dating violence (Howard *et al.*, 2005). The reverse also appears true; that is, researchers have found that youth who reported dating violence perpetration were almost five times more likely to report perpetration of other peer violence (Swahn *et al.*, 2008). Likewise, youth who reported dating violence perpetration were also at increased risk of being victimized through other peer violence (odds ratio: 3.24; confidence interval: 2.68, 3.91) (Swahn *et al.*, 2008).

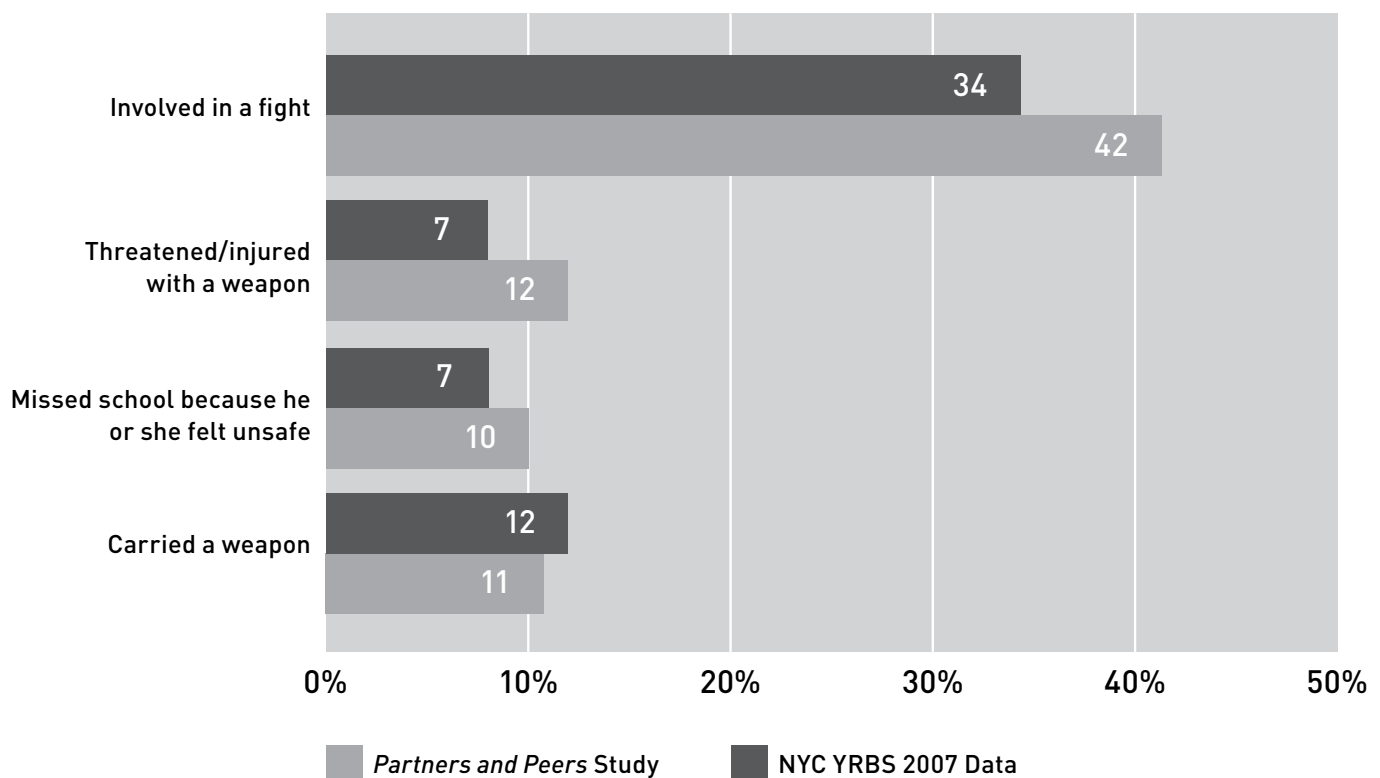
The more severe the violence, the stronger these relationships become, so that youth who reported perpetrating severe dating violence against a partner were almost eight times as likely to perpetrate severe violence against their peers than other youth (Swahn *et al.*, 2008). Likewise for victimization, researchers have shown that having been in a physical fight with a peer and having been hit by an adult with intention to harm were both risk factors for serious physical dating violence victimization (Foshee *et al.*, 2004).

What the Study Asked

The study asked five questions about general violence drawn from the Youth Risk Behavior Survey (YRBS):

1. During the past 30 days, on how many days did you not go to school because you felt you would be unsafe at school or on your way to or from school?
2. During the past 30 days, on how many days did you carry a weapon such as a gun, knife, or club?
3. During the past 12 months, how many times has someone threatened or injured you with a weapon such as a gun, knife, or club?
4. During the past 12 months, how many times were you in a physical fight?
5. At any time during the past 12 months, have you been a member of a gang?

Figure 9: Comparison of NYC YRBS 2007 Data and Study Sample on Violence Indicators*



*Denominators based on entire sample of youth and ranged from 1,285 to 1,286. Ranges are used due to missing data on these individual questions.

Partners and Peers: Research Findings

Overview of Community Violence

In this study, 10% of youth (11% female and 8% male) felt unsafe at school or on their way to or from school at some point in the last 30 days. Nearly one in ten youth reported carrying a weapon within the last month and 12% reported they were threatened or injured with a weapon within the last year. A larger percentage of youth (42%) reported being in a physical fight during the past year and 11% of youth reported being a member of a gang

during the past year. Figure 9 shows a comparison of these data with 2007 NYC Youth Risk Behavior Survey information.

Current Dating Violence and Victimization and Other Violent Experiences

Youth who have experienced other violence as represented by the five violence questions (previously listed) have been victimized more frequently by dating violence. More than one-third of boys who report being victims of physical dating violence also reported carrying a weapon in the last 30 days, as compared to 18% of boys who are not in a violent

Table 5: Physical Dating Violence Victimization and Other Violence*

	Victims of Physical Dating Violence		Students in Nonviolent Relationships	
	Girls	Boys	Girls	Boys
Missing school due to the fear of violence in the last 30 days	16%	10%	10%	6%
Carrying a weapon in the last 30 days	11%	34%	6%	18%
Being threatened or injured with a weapon in the past 30 days	18%	32%	8%	18%
Participating in a fight in the past 12 months	68%	63%	37%	50%
Gang membership in the past 12 months	9%	29%	8%	18%

*Denominators based on youth who reported having a partner within the last year. The physical dating violence victimization scale is from the Conflict in Adolescent Dating Relationship Inventory (CADRI), and the community violence questions are based on the Youth Risk Behavior Survey (YRBS) questions. Denominators for girl victims ranged from 148 to 152, and for boy victims from 108 to 111, with ranges due to missing data on individual questions. Denominators for girls in a nonviolent relationship ranged from 349 to 354 and for boys from 255 to 260, with ranges due to missing data on individual questions.

relationship. Similarly, a larger percentage of girls who are currently in a physically violent relationship reported missing school during the last month due to fear of violence than girls who are not in this type of relationship (16% vs. 10%).

Current Sexual Dating Violence Victimization and Other Violent Experiences

Nearly 20% of girls who reported currently being in a sexually violent dating relationship reported being threatened or injured with a weapon in the last year, compared to 10% of girls who are not currently experiencing this type of relationship.

A third of boys who report sexual violence victimization with their current partner also reported being a member of a gang at some point during the past year, compared to 18% of boys in nonviolent relationships. Similarly, nearly twice as many boys who are currently experiencing sexual violence from a dating partner report missing school because of fear for their safety (12% vs. 6%, respectively).

Current Physical Dating Violence Perpetration and Perpetration of Other Violence

Girls who report perpetrating physical dating violence against their partners also report a higher

Table 6: Sexual Dating Violence Victimization and Other Violence*

	Victims of Sexual Dating Violence		Students in Nonviolent Relationships	
	Girls	Boys	Girls	Boys
Missing school due to the fear of violence in the last 30 days	15%	12%	12%	6%
Carrying a weapon in the last 30 days	14%	41%	7%	19%
Being threatened or injured with a weapon in the past 30 days	20%	34%	10%	20%
Participating in a fight in the past 12 months	63%	61%	43%	52%
Gang membership in the past 12 months	9%	33%	5%	18%

*Denominators based on youth who reported having a partner within the last year. The sexual dating violence victimization scale is from the Conflict in Adolescent Dating Relationship Inventory (CADRI), and includes three questions on sexual violence (excluding forced kissing), and the community violence questions are based on the Youth Risk Behavior Survey (YRBS) questions. Denominators for girl victims was 56, and for boy victims ranged from 57 to 59, with ranges due to missing data on individual questions. Denominators for girls in a nonviolent relationship ranged from 384 to 392, and for boys from 283 to 288, with ranges due to missing data on individual questions.

prevalence of other violence, with 61% reporting they have been in a physical fight within the last year compared to 34% of girls who do not perpetrate this violence. Likewise, boys who reported perpetrating physical violence against a partner had a higher prevalence across all the violence indicators, with 35% of those boys also reporting that they carried a weapon in the last month (compared to 21% of boys who did not report perpetrating physical dating violence), 32% reported being threatened or injured with a weapon in the last year (compared to 20% of boys who did not report perpetrating physical violence), and 30% reported being

a member of a gang (compared to 20% of boys who did not report perpetrating physical violence).

Current Sexual Dating Violence Perpetration and Perpetration of Other Violence

Sexual and physical dating violence perpetration are similar in that youth who report sexual violence perpetration also report higher levels of experiencing and perpetrating other forms of violence. For boys, sexual violence perpetrators reported greater rates of occurrences than boys who did not perpetrate this dating violence, in these areas: feeling unsafe at or going to and from school (14% vs. 6%),

Table 7: Physical Dating Violence Perpetration and Other Violence*

	<i>Perpetrators of Physical Dating Violence</i>		<i>Students in Nonviolent Relationships</i>	
	Girls	Boys	Girls	Boys
Missing school due to the fear of violence in the last 30 days	15%	11%	10%	7%
Carrying a weapon in the last 30 days	10%	35%	6%	21%
Being threatened or injured with a weapon in the past 30 days	16%	32%	7%	20%
Participating in a fight in the past 12 months	61%	60%	34%	53%
Gang membership in the past 12 months	8%	30%	9%	20%

*Denominators based on youth who reported having a partner within the last year. The physical dating violence perpetration scale is from the Conflict in Adolescent Dating Relationship Inventory (CADRI), and the community violence questions are based on the Youth Risk Behavior Survey (YRBS) questions. Denominators for girl perpetrators ranged from 220 to 223, and for boy perpetrators ranged from 61 to 63, with ranges due to missing data on individual questions. Denominators for girls in a nonviolent relationship ranged from 278 to 284, and for boys from 302 to 308, with ranges due to missing data on individual questions.

carrying a weapon during the last month (36% vs. 21%), being in a physical fight during the last year (61% vs. 53%), and/or being a gang member (34% vs. 19%). Likewise, girls who report perpetrating sexually violent behavior against their partners also report higher levels (compared to girls who do not perpetrate sexual violence) for the following behaviors: missing school because they felt unsafe at or on the way to or from school (21% vs. 11%), carrying a weapon in the last 30 days (16% vs. 7%), and/or being threatened or injured with a weapon within the last year (21% vs. 10%).

Associated Factors for Dating Violence Perpetration and Victimization

The study examined the gender-specific relationships between the perpetration of sexual and physical dating violence and the perpetration or victimization of other violence behaviors. Controlling for age and race/ethnicity, girls who reported being in a physical fight within the past year were three times more likely to have perpetrated physical violence against a dating partner over the same timeframe than girls who report not being in a fight. Likewise, girls who report being threatened or

Table 8: Sexual Dating Violence Perpetration and Other Violence*

	<i>Perpetrators of Sexual Dating Violence</i>		<i>Students in Nonviolent Relationships</i>	
	Girls	Boys	Girls	Boys
Missing school due to the fear of violence in the last 30 days	21%	14%	11%	7%
Carrying a weapon in the last 30 days	16%	36%	7%	21%
Being threatened or injured with a weapon in the past 30 days	21%	27%	10%	21%
Participating in a fight in the past 12 months	57%	61%	45%	53%
Gang membership in the past 12 months	9%	34%	8%	19%

*Denominators based on youth who reported having a partner within the last year. The sexual dating violence perpetration scale is from the Conflict in Adolescent Dating Relationship Inventory (CADRI) and includes three questions on sexual violence (excluding forced kissing), and the community violence questions are based on the Youth Risk Behavior Survey (YRBS) questions. Denominators for girl perpetrators ranged from 43 to 44, and for boy perpetrators ranged from 53 to 55, with ranges due to missing data on individual questions. Denominators for girls in a nonviolent relationship ranged from 457 to 464, and for boys from 310 to 316, with ranges due to missing data on individual questions.

injured with a weapon in the past year were almost three times more likely to perpetrate physical violence against their partner than girls who report not being injured or threatened.

For boys, carrying a weapon within the last 30 days was associated with perpetration of both physical and sexual violence against a dating partner in the last 12 months. Boys who report carrying a weapon were nearly three times more likely to have perpetrated physical violence and approximately two-and-half times more likely to have perpetrated sexual violence against their dating partner than boys who reported not carrying a weapon.

Gang membership was not a significant predictor of perpetration of *physical* dating violence for either boys or girls but was significant for the perpetration of *sexual* violence by boys against their dating partners—and also against boys by their partners. Boys who reported being a member of a gang during the last year were two times more likely to have perpetrated sexual violence against their dating partner and were also two times more likely to report having experienced sexual violence from their partner than boys who reported no gang membership.

How has sexual or dating violence affected you?

*“It made me feel so bad about myself
that I tried suicide.”*

—16-year-old female

Chapter 5: The Impact of Sexual and Dating Violence on Health

Sexual and dating violence have significant results on the health and wellbeing of young people. Immediate health effects include injury, but youth can also experience long-term health and psychological sequelae.

Sexual and Dating Violence Impact on Health: Brief Literature Review

Recent research has shown that youth who experience dating violence are at a higher risk for:

- having eating disorders,
- suicidal thoughts or attempts,
- lower self-esteem and emotional wellbeing,
- smoking, binge drinking, early initiation of drinking and cocaine use,
- risky sexual behaviors, such as noncondom use and having multiple sex partners, and
- pregnancy, when compared to youth who have not experienced dating violence.

References:

Ackard and Neumark-Sztainer, 2003; Gidycz *et al.*, 2008; Ackard, Eisenberg, and Neumark-Sztainer, 2007; Ackard, Neumark-Sztainer, and Hannan, 2003; Silverman *et al.*, 2001; Olshen *et al.*, 2007; Silverman, Raj, and Clements, 2004; Howard, Wang, and Yan, 2007; Howard and Wang, 2003; Eaton *et al.*, 2007; Coker *et al.*, 2000.

Limited research has focused on the health results on youth who perpetrate dating violence. Raj and colleagues (2007) conducted a qualitative study with adolescent male perpetrators of dating violence. Raj *et al.*, (2007) found that nonuse of condoms was more common in steady, often-abusive relationships, despite reports of high-risk sexual activity, including sexual infidelity and multiple sex partners. *Partners and Peers: Sexual and Dating Violence among NYC Youth* adds to this literature.

Youth who report experiencing nonpartner sexual abuse also report adverse health outcomes. A recent longitudinal study found that participants who reported sexual abuse in childhood and early adolescence were almost four times as likely to have inflicted self-harm (in the form of suicide attempts or self-mutilation) than participants with no history of sexual abuse (Noll *et al.*, 2003). Studies report that on average, sexual abuse victims start having voluntary sex significantly earlier than nonvictims, engaging in more high-risk sexual behaviors, including having multiple sex partners, using drugs and abusing alcohol, not using contraception, and trading sex for money or drugs (Population Information Program, 2000). The same report found that among women, victims of childhood sexual assault were twice as likely to be heavy consumers of alcohol and nearly three times as likely to become pregnant before the age of 18.

As this research indicates, there is a growing awareness regarding the health implications of dating and sexual violence on youth. Figure 10 shows the many associated health outcomes.

Figure 10: Health Outcomes of Partner Violence/Sexual Violence/Child Sexual Abuse*

Fatal Outcomes

Direct and Indirect

- Homicide
- Suicide
- AIDS-related
- Maternal mortality

Nonfatal Outcomes

Chronic Conditions

- Chronic pain syndrome
- Irritable bowel syndrome
- Gastrointestinal syndrome
- Fibromyalgia
- Somatic complaints

Physical Health

- Injury
- Physical symptoms
- Functional impairment
- Poor subjective health
- Permanent disability

Negative Health Behaviors

- Smoking
- Alcohol and substance use
- Sexual risk-taking
- Physical inactivity
- Over/undereating
- Ignoring preventive healthcare

Mental Health

- Posttraumatic stress
- Depression
- Anxiety
- Phobias/panic disorders
- Eating disorders
- Sexual dysfunction
- Low self-esteem
- Mental distress
- Substance-use disorder

Reproductive Health

- STI's/HIV
- Pelvic inflammatory disease
- Other gynecological disorders
- Unwanted pregnancy
- Unsafe abortion
- Pregnancy complications
- Miscarriage/low birth weight

* Figure based on the following sources: (1) PAHO factsheet, (2) Ellsberg and Heise (2005).

Table 9: Physical Dating Violence Victimization and Health*

	Victims of Physical Dating Violence		Nonvictims of Sexual Dating Violence	
	Girls	Boys	Girls	Boys
Reported low satisfaction with health	37%	16%	27%	14%
Reported low self-esteem	33%	19%	21%	17%
Reported high physical discomfort	41%	18%	27%	11%
Reported high to very high emotional discomfort	41%	14%	25%	9%

*Denominators based on youth who reported having a partner within the last year. The physical dating violence victimization scale is from the Conflict in Adolescent Dating Relationship Inventory, and the health questions are based on questions from the Child Health and Illness Profile—Adolescent Edition (CHIP—AE). Denominators for girl victims ranged from 128 to 152, and for boy victims ranged from 95 to 112, with ranges due to missing data on individual questions. Denominators for girls in a nonviolent relationship ranged from 312 to 358, and for boys from 221 to 263, with ranges due to missing data on individual questions.

Table 10: Sexual Dating Violence Victimization and Health*

	Victims of Sexual Dating Violence		Nonvictims of Sexual Dating Violence	
	Girls	Boys	Girls	Boys
Reported low satisfaction with health	27%	20%	31%	14%
Reported low self-esteem	26%	18%	26%	18%
Reported high physical discomfort	52%	14%	28%	13%
Reported high to very high emotional discomfort	48%	15%	28%	10%

*Denominators based on youth who reported having a partner within the last year. The sexual dating violence victimization scale is from the Conflict in Adolescent Dating Relationship Inventory (CADRI), and includes three questions on sexual violence (excluding forced kissing), and the health questions are based on questions from the Child Health and Illness Profile—Adolescent Edition (CHIP—AE). Denominators for girl victims ranged from 56 to 67, and for boy victims ranged from 52 to 60, with ranges due to missing data on individual questions. Denominators for girls in a nonviolent relationship ranged from 346 to 393, and for boys from 246 to 291, with ranges due to missing data on individual questions.

Youth Disclosure and Help-Seeking: What Research Shows

Data from an urban study of adolescent disclosure of sexual violence shows that 60% of adolescents who experienced rape or attempted rape disclosed this information to one or more individuals, whereas only 47% of those who reported experiencing coercive sex told someone about that encounter (Rickert, Wiemann, and Vaughan, 2005). A public-school study of rural high school students in North Carolina found that 60% of adolescent dating violence victims did not seek help (Ashley and Foshee, 2005). A study of young women in NYC found those seeking reproductive healthcare thought that health providers were the most appropriate adults to assist them with their experience of partner violence (Zeitler *et al.*, 2006).

Consistently, research has shown that adolescents are more likely to disclose sexual and dating violence experiences to their peers. According to the National Survey of Adolescents, young women whose unwanted sexual experience occurred between the ages of seven and 13 were more likely to tell an adult, while older adolescents were more likely to tell a peer (Krogan, 2004). Another study found that most victims of dating violence who sought help chose friends and family rather than professionals (Ashley and Foshee, 2005). A recent study of Latino ninth graders found that teens are more likely to seek help for a dating violence situation from informal sources of support, such as friends, than from formal sources such as healthcare professionals (Ocampo, Shelley, and Jaycox, 2007). This study found that students do not confide in or trust the adults in their social network. A Midwestern study of high school students found that not only do youth turn to their friends when they experience dating violence but they go to them for romantic-relationship problems as well (Weisz *et al.*, 2006).

What the Study Measured

For health outcomes, the study used the Child Health Illness Profile—Adolescent Edition (CHIP—AE) (Riley *et al.*, 1998), which measures include the following subscales:

- satisfaction with health,
- physical discomfort,
- self-esteem, and
- emotional discomfort.

The “satisfaction with health” scale includes questions on how the respondents rate their health in general, and a rating of health status. The “physical discomfort” scale examines how often in the past four weeks respondents have felt really sick, and specific symptoms they have felt, including fever or chills, dizziness, wheezing or trouble breathing, chest pain, headaches, stomach aches, and other symptoms that would result in physical discomfort. The “self-esteem” scale included the respondent’s agreements with the following statements: “I have a lot of good qualities,” “I have much to be proud about,” “I like being the way I am,” “I am satisfied with how I live my life,” and “I feel socially accepted.” The “emotional discomfort” scale assesses how often in the past four weeks the respondent had trouble falling asleep or staying asleep, trouble relaxing, being nervous or uptight, moody, irritable, or grouchy.

Partners and Peers: Research Findings

Current Partner Physical Violence Victimization and the Impact on Health

A similar relationship between physical dating violence victimization and health exists. Girls who reported physical violence in their relationships reported lessened health and self-esteem, with 37% reporting lower satisfaction with their health and 33% reporting low levels of self-esteem (compared to 26% and 21% of girls, respectively, who do not experience this violence). Boys who are victims in physically violent relationships also report higher emotional discomfort (14% vs. 10%) and physical discomfort (18% vs. 11%) than boys who are not experiencing this violence.

Table 11: Physical Dating Violence Perpetration and Health*

	<i>Perpetrators of Physical Dating Violence</i>		<i>Nonperpetrators of Physical Dating Violence</i>	
	Girls	Boys	Girls	Boys
Reported low satisfaction with health	34%	14%	26%	15%
Reported low self-esteem	27%	19%	22%	17%
Reported high physical discomfort	36%	18%	27%	12%
Reported high to very high emotional discomfort	36%	19%	24%	9%

*Denominators based on youth who reported having a partner within the last year. The physical dating violence perpetration scale is from the Conflict in Adolescent Dating Relationship Inventory (CADRI) and the health questions are based on questions from the Child Health and Illness Profile—Adolescent Edition (CHIP—AE). Denominators for girl perpetrators ranged from 199 to 224, and for boy perpetrators ranged from 53 to 64, with ranges due to missing data on individual questions. Denominators for girls in a nonviolent relationship ranged from 213 to 287, and for boys from 263 to 311, with ranges due to missing data on individual questions.

Table 12: Sexual Dating Violence Perpetration and Health

	<i>Perpetrators of Sexual Dating Violence</i>		<i>Nonperpetrators of Sexual Dating Violence</i>	
	Girls	Boys	Girls	Boys
Reported low satisfaction with health	27%	16%	30%	15%
Reported low self-esteem	29%	15%	24%	18%
Reported high physical discomfort	48%	15%	29%	12%
Reported high to very high emotional discomfort	27%	12%	29%	11%

*Denominators based on youth who reported having a partner within the last year. The sexual dating violence perpetration scale is from the Conflict in Adolescent Dating Relationship Inventory (CADRI) and includes three questions on sexual violence (excluding forced kissing), and the health questions are based on questions from the Child Health and Illness Profile—Adolescent Edition (CHIP—AE). Denominators for girl perpetrators ranged from 38 to 45, and for boy perpetrators ranged from 50 to 56, with ranges due to missing data on individual questions. Denominators for girls in a nonviolent relationship ranged from 402 to 466, and for boys from 266 to 319, with ranges due to missing data on individual questions.

Current Partner Sexual Dating Violence Victimization and the Impact on Health

The impact of sexual dating violence victimization on health is very high. Nearly half (48%) of all the girls and 15% of the boys who report being sexually victimized in their dating relationship also reported high to very high emotional discomfort (compared to 28% of girls and 10% of boys who are not sexually abused in relationships). These youth encounter physical symptoms associated with experiences of sexual dating violence, with more than half of all girls (52%) and 14% of boys reporting average to high physical discomfort. Also, boys who report sexual dating violence victimization additionally report lower satisfaction with their health overall, when compared to boys who do not experience this victimization.

Current Partner Physical Violence Perpetration and the Impact on Health

Girls who reported perpetrating physical violence against their dating partner report lower levels of self-esteem and wellbeing on every health indicator, with a third reporting low satisfaction with health, more than a quarter (27%) reporting low levels of self-esteem, and more than a third reporting both average to high physical discomfort (36%) and high to very high emotional discomfort (36%). Boys who report perpetrating physical violence against their partner were nearly twice as likely to report high to very high emotional discomfort when compared to boys who did not (19% vs. 9%).

Table 13: Adjusted Odds Ratios (95% Confidence Intervals) of Functional Health Status Indicators*

Dating Violence	Fair to Poor Health Status	High Emotional Discomfort	High Physical Discomfort
Physical Violence			
Current Victim		1.7 (1.1, 2.5)	1.7 (1.2, 2.4)
Current Perpetrator		1.7 (1.1, 2.5)	---
Ever Victim		1.9 (1.2, 2.8)	1.8 (1.3, 2.7)
Sexual Violence			
Current Victim	2.6 (1.4, 4.8)	1.9 (1.2, 3.3)	2.2 (1.4, 3.9)
Current Perpetrator	2.6 (1.3, 5.1)	---	1.8 (1.1, 3.0)
Ever Victim		1.7 (1.1, 3.0)	2.5 (1.4, 4.2)
Both Physical and Sexual Violence			
Current Victim		2.8 (1.5, 5.1)	2.4 (1.1, 4.4)
Current Perpetrator		2.0 (1.1, 4.0)	---
Ever Victim		2.8 (1.5, 5.2)	3.7 (2.0, 6.9)

*Data presented at the 2008 Society for Adolescent Medicine Conference: Rickert *et al.*, 2008. Data is based on youth who reported having a partner within the last year, with (current victim or current perpetrator) questions from CADRI, and youth who reported ever having a dating relationship (ever victim), questions from the DVI. The health scales are based on questions from the Child Health and Illness Profile—Adolescent Edition (CHIP—AE).

Current Partner Sexual Violence Perpetration and the Impact on Health

Youth who report dating violence perpetration experience effects on health and wellbeing. Boys who report perpetrating sexual violence against their dating partner reported a lower satisfaction with their health and higher emotional discomfort than boys who did not perpetrate this violence. Likewise, girls who are sexually violent to their partners reported lower levels of self-esteem and reported higher levels of physical discomfort more often than girls who did not report perpetrating this violence.

Nonpartner Sexual Violence Victimization and the Impact on Health

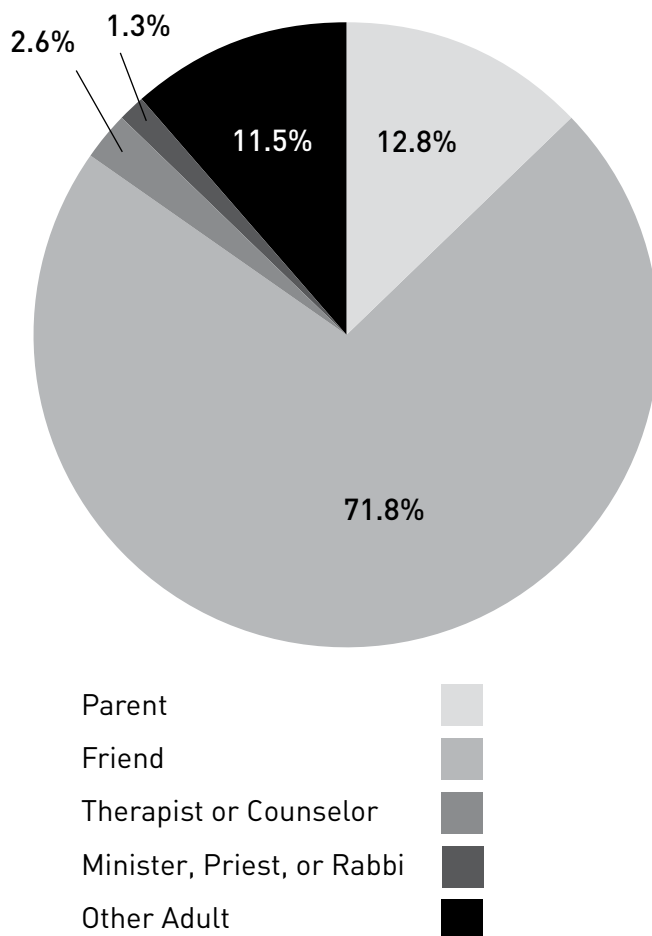
Nonpartner sexual violence has an impact on health. In this study, girls who reported experiencing nonpartner sexual violence report lower satisfaction with their health twice as often (44%) than girls who reported not experiencing this violence (26%). Boys who experienced sexual abuse also reported lower satisfaction with their health (29%). Nearly half (46%) of all girls and more than a quarter (26%) of all boys who reported a history of nonpartner sexual violence reported average to high physical discomfort.

“Sexual violence has affected me, emotionally and physically. I’m doing better now, but it’s hard to trust people.”

—15-year-old female

The study found that youth who experienced non-partner sexual violence scored lower on measures of wellbeing and self-esteem. Forty-one percent of girls and 35% of boys with a history of nonpartner sexual violence reported lower levels of self-esteem as compared to 22% of girls and 20% of boys who did not report a history of this violence. Similarly, 42% of girls and a quarter of boys who reported having experienced sexual abuse reported higher levels of emotional discomfort compared to only 23% of girls and 8% of boys who did not report this history of violence.

Figure 11: Person Youth First Tell about Their Experiences with Dating Violence*



* Data based on (133) youth who self-identified as having experienced sexual or dating violence.

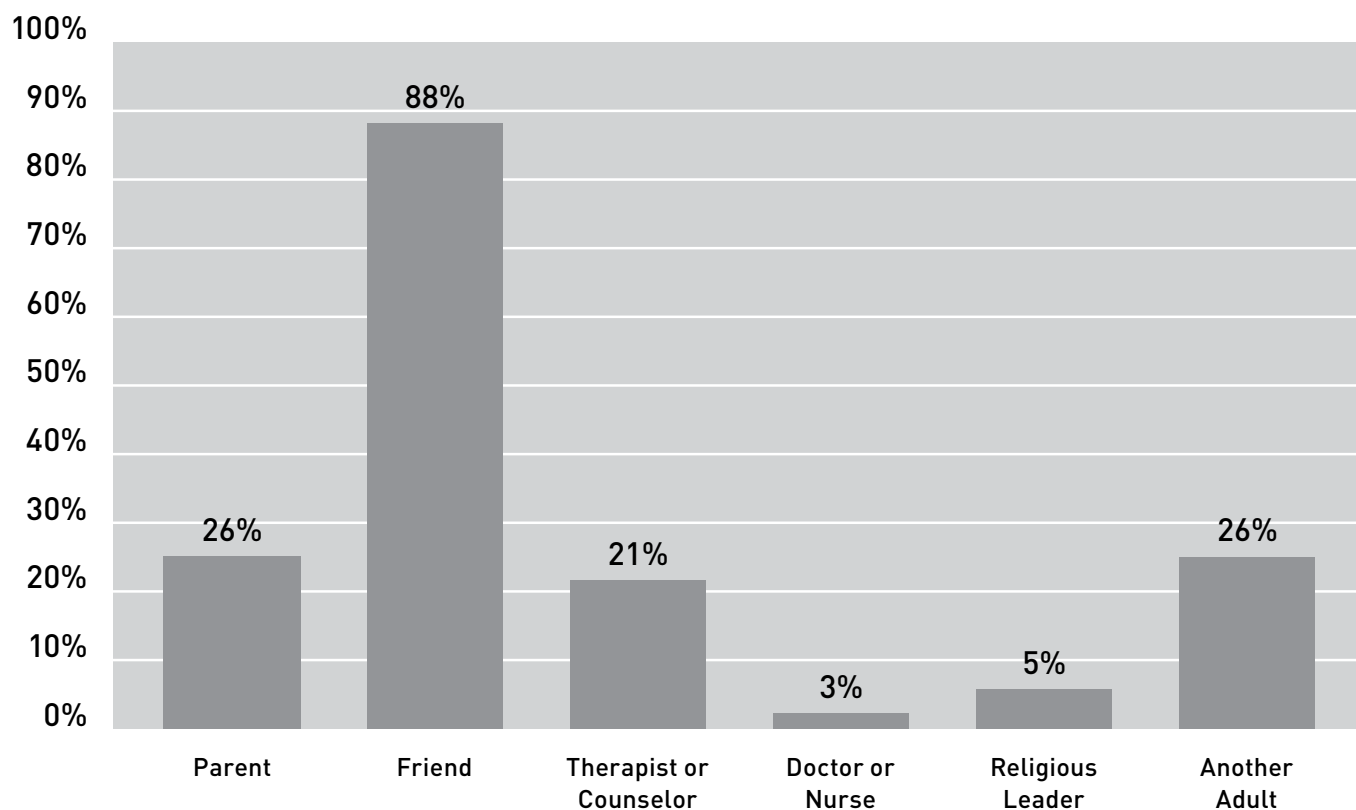
Dating Violence Victimization and Associated Health Factors

Multivariate analyses, controlling for potential confounders, such as gender, ethnicity, country of birth, and history of child sexual abuse demonstrated that perpetration or victimization of dating violence was associated with three of four health outcomes. That is, high levels of emotional and physical discomfort were significantly associated with being a victim of either physical or sexual violence in the last year, as well as among those who reported a lifetime history of physical and/or sexual victimization. Youth who reported lifetime sexual *and* physical dating violence victimization were nearly four times more likely to report having high physical discomfort. In addition, youth who reported being victimized by sexual dating violence in the last year were nearly three times more likely to report a poorer health status than youth who had not experienced this violence.

Dating Violence Perpetration and Associated Health Factors

Those who perpetrated dating violence also experienced adverse health outcomes. Youth who reported perpetrating sexual violence in the last year were two-and-a-half times more likely to report poorer health status than youth who did not report perpetrating violence. Those who reported perpetrating sexual violence directed toward a dating partner in the past year were almost two times more likely to report high levels of physical discomfort than those who did not. Youth who perpetrated sexual violence did not have an increased risk of emotional discomfort, but youth who reported perpetrating physical dating violence did, and were nearly two times as likely to report higher emotional discomfort than those who did not report perpetrating violence. These data demonstrate the critical role various types of dating violence independently contribute to the reporting of functional

Figure 12: Youth Dating Violence Disclosure*



* Data based on (133) youth who self-identified as having experienced sexual or dating violence.

health status among adolescents. Future research should explore these connections.

Telling Someone and Getting Help

A smaller percentage of youth identified themselves as having experienced physical or sexual violence than those identified through the series of behavior-specific questions. This means many youth do not identify themselves as having been “abused” or a victim of dating violence. Of those who did identify themselves as victims of dating violence, 59% told someone about their experience. Of those who did tell, 34% told someone about the physical violence from a partner, 11% told someone about sexual violence from a partner, and 14% told someone about experiencing both physical and sexual violence from their partner.

How has dating violence affected you?

“It has affected me because I know some people my age that are in a violent relationship and it bothers me a lot.”

—17-year-old male

Youth who did tell someone did so quickly, with 30% telling someone on the same day it occurred and 12% telling someone within two days. Only 14% of youth told someone more than a year after the violence occurred. Youth also reported telling many people about the violence. For those that did tell, they told an average of three people ranging from some who only told one person, to one youth who told 25 people.

Who are youth telling about the violence they are experiencing in their dating relationships? Overwhelmingly, 72% told their friends *first*, while 13% told a parent first.

After telling a friend, many youth (51%) go on to tell more friends. Overall, 88% told a friend about the violence and one-quarter told a parent. Twenty-two percent of youth told a therapist or counselor, 3% a doctor or nurse, 5% a religious leader, and 26% another adult. Nearly one in five youth who told someone reported seeking help from a health professional, teacher, or guidance counselor.

“We knew it would be a valuable study that would provide us with a great deal of information about our students. Once we saw the results, we shared them with the entire school community because it was important to educate everyone about the problem.”

—participating school principal

Chapter 6: From Research to Action

The frequency of sexual and dating violence among youth presented in this report requires action on many levels: from administrators, students, parents, teachers, health professionals, and youth—as well as city leaders. The study’s recommendations follow a two-pronged strategy: ending sexual and dating violence among NYC youth and providing appropriate response to those that have already experienced this violence. It is essential that both of these occur in order to address the scope of sexual and dating violence.

Prevention of Sexual and Dating Violence

Prevention Framework

The New York City Alliance Against Sexual Assault has developed a prevention framework in order to end sexual violence in New York City. The Alliance will develop prevention programs as well as assist other organizations in developing programs that are:

- **Focused on Norms Change:** Borrowing from the social ecological framework (see text box: The Social Ecological Model), the Alliance believes environment influences behavior, and that in order to successfully prevent sexual and dating violence, the Alliance needs to address the *norms* that are conducive to, or tolerant of this violence. Norms are a key mechanism by which institutions and organizations shape behaviors, positively and negatively (Fujie Parks, Cohen, and Kravitz-Wirtz, 2007). Norms are standards or unspoken rules that are socially enforced and provide a model for behavior. Sexual and dating violence will not end unless the prevailing norms of socialization and acceptance of this violence are challenged and changed.
- **Comprehensive and Multidisciplinary:** No single program will end sexual and dating violence. The Alliance believes in using a spectrum or continuum of activities that are aimed at individual-, community-, and systems-level change. This requires participation from multiple sectors and stakeholders.

The Alliance turned to the *Spectrum of Prevention* model developed by the Prevention Institute (Cohen and Swift, 1999).

- **Participatory:** Systematic changes are impossible without active community involvement. The Alliance has adopted Participatory Action Research (PAR) as the path toward the critical next step in reaching out to communities that are underserved in these systems in order to create new partnerships and collectively work toward ending sexual and dating violence in New York City. The PAR process includes meaningful community involvement in all phases, power-sharing between program staff and the community, mutual respect and bidirectional learning from everyone involved, and a focus on action (White, Suchowierska, and Campbell, 2004).
- **Engaging Community Leaders as Agents of Change:** Following “the norms” approach, there are key champions and leaders that represent the “tipping points” to changing social norms. These people are respected and looked up to in their communities and are key allies in ending sexual violence. The Alliance uses community mobilizing to actively engage and further develop the leadership of these champions to prevent sexual and dating violence.
- **Stage-Specific:** The Alliance believes that communities are in different stages of readiness for primary prevention. Community readiness is the degree to which a community is prepared to take action on a particular health or social issue (Oetting *et al.*, 1995). Interventions must be challenging enough to move a community forward, but efforts that are too ambitious are likely to fail because community members will not be able to respond (Plested *et al.*, 2005). It is important to be clear that the concept of community readiness is not that some communities *are* ready while others are *not*. Rather, communities differ in the degree to which they are ready for action. If a community is at a very low level of readiness, then direct efforts, such

The Social Ecological Model

Individuals are influenced by their environments, and at the same time, an environment is shaped by its individuals. The social ecological model developed by Urie Bronfenbrenner in the 1970s emphasizes this constant interaction between individuals, the environment, and the layers in between. This model can also be applied to understand the factors important in sexual violence prevention.

Individual-level influences are biological, and include personal history factors that increase the likelihood that an individual will become a victim or perpetrator of violence. For example, hostility toward women, childhood history of sexual abuse, or witnessing family violence (among other factors) may influence an individual's behavior choices that lead to perpetration of sexual violence (CDC, 2004).

Relationship and group-level influences are factors that increase risk as a result of relationships with peers, intimate partners, and family members (CDC, 2004). Research has shown that social norms upheld by friends, family, and partners influence behavior (Fujie-Parks, Cohen, and Kravitz-Wirtz, 2007).

Community-level influences are factors that increase risk, based on social environments, and include an individual's experiences and relationships with schools, workplaces, and neighborhoods.

Societal-level influences are larger, macro-level factors that influence sexual violence, such as gender inequality, religious or cultural belief systems, societal norms, and economic or social policies that create or sustain gaps and tensions between groups of people (CDC, 2004).

Interactions can occur within a particular system or across systems. Most often, these interactions occur in a top-down manner; environment influences individual behavior. Yet, interactions can also occur in the opposite direction. Individuals can be instrumental in forming alliances or coalitions to enact change within their community and/or society. Furthermore, other factors, such as technology, can move in both directions.

The social ecological model allows one to examine various factors that explain individual behavior, and calls for prevention strategies that include activities affecting and targeting multiple levels of this model.

as awareness-raising campaigns, will need to be made to improve the level of readiness. If a community is at a mid- or high level of readiness, then that community can begin designing an action agenda. All prevention work begins with community-based readiness assessment.

- **Solution-Based and Positively Focused:** The Alliance envisions a city without sexual and dating violence. Prevention work is grounded in promoting a positive set of behaviors through the creation of environments and norms that promote those behaviors, instead of focusing solely on eliminating negative behavior. The outcome of this prevention work is seen as building healthy behaviors and communities. The Alliance understands the importance of working with communities to clearly define what the term *healthy* means.

- **Integrated and Collaborative:** Many social movements are focused on changing social norms and behaviors. The norms that allow sexual and dating violence to continue in NYC also allow for other unhealthy behaviors and norms (such as behaviors that lead to HIV transmission, general violence, bullying, hate crimes, etc.). Instead of creating separate prevention movements, the City should work together to comprehensively change the social norms that affect these behaviors. The Alliance believes in working across sectors, and using—as well as sharing—best practices and knowledge with allies in other movements.

Programmatic Recommendations

This study provides data to inform prevention programming. Based on this data, the Alliance recommends that:

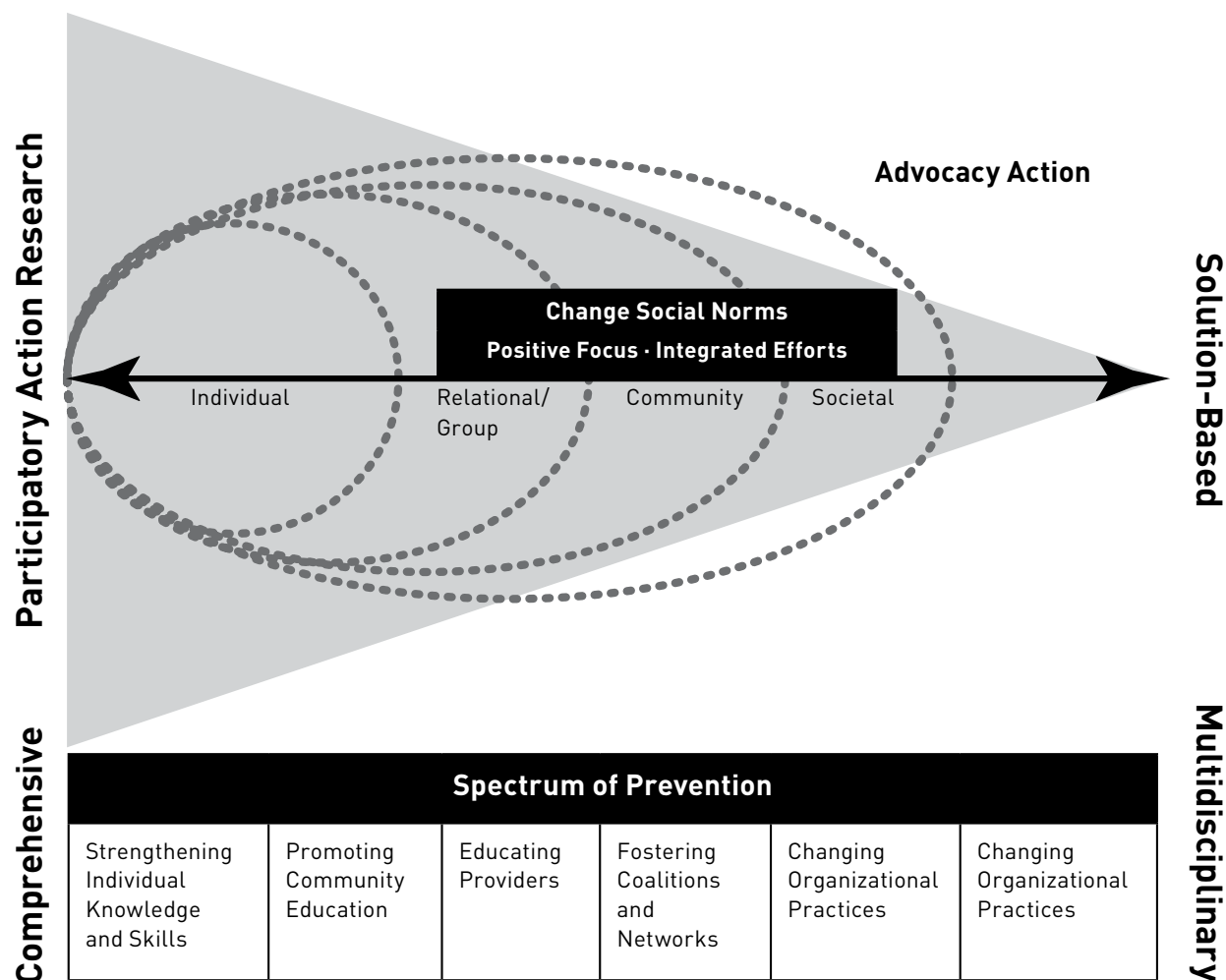
- **Schools and programs that work with youth should include a focus on primary prevention.**

Primary prevention focuses on examining and addressing the root causes of violence such that violence can end *before* it occurs.

- **Prevention efforts should work with and develop youth leaders as an impetus for change.**

Since youth often turn to friends in times of crisis, it is important to develop leadership among youth to address the root causes of sexual and dating

Figure 13: NYC Alliance Against Sexual Assault Violence Prevention Framework



violence and challenge accepted peer norms. The Alliance’s Youth Action Council is one example of building youth leadership (see text box: Youth Action Council on page 70).

- **Prevention efforts should include a strong focus on changing social norms.** This can happen by focusing prevention efforts at the community level, such as schools and peer networks. By focusing on changing community norms, the underlying factors that influence violent behaviors can be changed.
- **Prevention programming must include the term “sexual violence” in the definition of “dating violence,” and vice versa.** This research shows that sexual violence is a component of dating violence. Many dating violence prevention efforts only

address physical violence, but these efforts will not end dating violence if they fail to address a key component of dating violence—sexual violence. The sexual and dating violence prevention movements should work together to ensure comprehensive dating violence prevention efforts.

- **Prevention efforts should be integrated and collaborative with other health efforts.** This study shows the impact of dating violence on the health of young people. Often health programs such as those that seek to reduce teenage pregnancy, HIV transmission, and others are seeking to address the same social norms as the dating violence prevention programming. Working together ensures comprehensive prevention programs for youth.

Youth Voices:

What Should Schools Do to Reduce or Prevent Sexual or Dating Violence?

"Have sexual and dating violence classes and programs in the school."

—17-year-old female

"Give class and information about it. And even have a school night about it. Or a special day."

—16-year-old female

"Give out info on it and make students feel comfortable with the school workers so they can open up to them."

—16-year-old male

"Counseling and scheduled one-on-one conferences with students."

—17-year-old male

"Have more young counselors so the teens can talk to them."

—17-year-old female

"Have groups with an equal amount of men and women and just let them come up with their own issues and talk about it."

—18-year-old male

"Have a program where you can speak to a counselor or a group of peers that are also living through the same experience."

—17-year-old male

"Have a sex-ed class. Not just about having sex, but signs of an abusive man or partner."

—19-year-old male

"Hold workshops to have people who had been a victim of abuse come in and talk to them and show them the results that can happen to them if they don't get help and come out of the relationship."

—17-year-old female

"I don't believe that they can do anything unless the student tells them or they see it, but in general maybe they could have class discussions about it so that maybe someone who is going through it can tell the staff."

—16-year-old female

"I think all the school can do is inform us on centers to provide a place where they can open up and express themselves and find a way to stop or prevent the sexual or dating violence."

—18-year-old male

"I think more schools should have workshops on sexual or dating violence to keep teens aware of the differences between someone loving you and trying to control and abuse you."

—18-year-old female

"I think that schools are doing a good job on having workshops about how to prevent this, it's just that teens say that they love their partners and they are afraid that their partner may leave them."

—18-year-old female

"Speak out about it don't keep it in the closet. People be knowing what's going on."

—19-year-old male

"Just keep giving us advice, speak about experiences they know about, and not give up on us."

—17-year-old female

• **Violent behaviors among youth can be the entry point for discussions about teen sexual and dating violence.** This study shows that youth who perpetrate or are victims of violence are at a higher risk of being involved (either as a perpetrator or victim) in teen sexual and dating violence. These violent behavior indicators should serve as an entry point for discussion with youth about their dating relationships. Likewise, addressing teen sexual and dating violence may also reduce other violent behaviors.

• **Health professionals should talk to adolescents about sexual and physical violence.** These discussions about sexual and physical violence can be both primary and secondary prevention of sexual and physical violence. It serves as primary prevention in that it changes the social norms around privacy and begins to start the dialogue on sexual and dating violence in the healthcare setting. It serves as secondary prevention in that it can potentially reduce the likelihood of revictimization. This study found that youth who experience nonpartner sexual violence are at an increased risk of experiencing dating violence. If these youth are asked about their nonpartner sexual violence and referred to services, this may potentially prevent them from getting into violent dating relationships.

Appropriately Responding to Sexual and Dating Violence

This study also provides rich data on victimization and experiences of young people. Based on this data, the Alliance makes recommendations for responding to young people who have already experienced sexual or dating violence.

Teens should have access to youth-friendly, culturally appropriate, and language-appropriate referral information. Given that teens disclose incidents of sexual and dating violence to friends first, providing them with referral information is key to helping them support each other and reducing the stigma around sexual and dating violence. One such resource that the Alliance developed is the NYC Teen Health Map: a subway map on one side and a youth-friendly referral guide on the other, which folds into a discreet card to be tucked into

the wallet. The referral guide includes information for those who may have experienced sexual violence, hotlines to call, free counseling, and healthcare centers in each of the five boroughs (see text box: NYC Teen Health Map on page 72).

School personnel and others who work with youth should be trained on how to properly handle disclosures and service referrals. Since many youth who have experienced sexual and dating violence tell someone about that violence, it is imperative that all those who work with young people are trained in how to properly handle disclosures and how to refer youth to services. Proper responses to disclosures of sexual and dating violence require that sensitivity and respect be given to the survivor. This training should be inclusive of several audiences: youth workers, including after-school program staff; school staff, including principals, teachers, guidance counselors, nurses, security guards, and janitors (among others); and healthcare professionals. This means that appropriate policies and procedures must be implemented in these settings.

If a teen discloses dating violence, counselors should inquire about histories of physical and sexual violence victimization. If the teen is seeking counseling for dating violence, it is important to explore histories of nonpartner sexual violence as well as to provide the most comprehensive care. Likewise, if the teen is seeking counseling for nonpartner sexual violence it is important to ask about violence within dating relationships.

Health professionals should speak with adolescents about sexual and physical violence. This study expanded on the growing body of literature that shows the connections between sexual and physical violence and adverse health outcomes. These associations highlight the importance of talking about sexual and relationship violence during youth healthcare visits. Healthcare professionals, when assessing the health of teenagers, must consider the role both current sexual and dating violence and past sexual abuse play in contributing to the presentation and exacerbation of physical and emotional symptoms.

► Youth Action Council

Including young people's perspectives is an integral part of the Alliance's goal to develop effective prevention and response programs for sexual violence and dating violence amongst youth. With the development of a Youth Action Council (YAC) composed of New York City youth ages 14 to 21, YAC members play a vital role in the Alliance and other allied organization's advocacy and research projects by providing ideas and feedback about youth and youth's needs. YAC assists program planners to better understand the concerns and priorities of young people, their families, and their communities.

The development of the YAC has been guided by a participatory and skill development approach that emphasizes involving young people in decision-making and leadership. Not only do YAC build skills among its members, but their involvement encourages civic responsibility and community service, helping young people feel valued by addressing issues important to them.

Youth input was a crucial component to the development of the YAC. The Alliance held two preliminary meetings with youth in May 2007 to identify issues of concern and to gather data on

the most effective ways to involve youth as members of the YAC. From these meetings, youth emphasized that topics of concern amongst their peers were date rape, behavior in relationships, how to help those who have

I wanted to be a part of YAC because I find sexual assault a serious problem all over the world and I'd like to help the cause.

—Mahfug Hossain, 17-year-old male YAC member

experienced sexual violence, how to prevent the abuse from occurring, and the role of pop culture in these issues. Young people highlighted that they want to be part of the YAC because they can make a difference in the lives of their peers, because they want to help end sexual violence amongst youth, they want to voice teens' concerns, and they want to raise awareness about these issues.

Through Youth Action Council meetings, youth have learned about primary prevention of sexual violence, or identifying the root causes of that violence. One such activity that has helped us explore with youth the root causes of and solution to sexual violence is the 'problem tree' activity. Through this activity, youth can examine the root causes of sexual violence (the roots of the tree), the effects of sexual violence (the leaves) and what can be done to change the situation and who can help (the flowers and fruit).

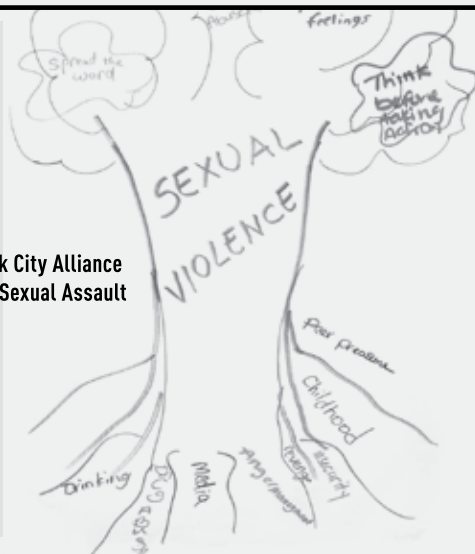
Youth are gaining valuable skills and peer-to-peer education from involvement in the YAC. The Alliance believes that New York City has the ability to overcome youth dating and sexual violence. Our Youth Action Council is in a prime position to help us improve the lives of youth through empowerment and education.

I wanted to be a part of YAC because it will help be a way to not only voice certain issues amongst teens, but also a way to help find solutions. I have always had an interest in solving different problems, but sexual violence is one that is more prominent today and grabs my attention more than others due to the increase in sex and sexual assault amongst teens. I think people, including myself, need to become more aware of the consequences of their actions and the issues of today. I think this is also a great opportunity for me to further build my leadership skills while gaining new ones.

—Anastasia Ramirez, 17-year-old female YAC member



New York City Alliance
Against Sexual Assault



Youth Voices:

What Do You Think Would Reduce Sexual or Dating Violence in the Lives of Teens?

*"A better understanding of one another.
To know where the relationship stands."*

—17-year-old male

*"I think more parents should talk to teens
about sexual or dating violence."*

—17-year-old female

*"Being able to talk to your partner without
being violent when you hear something
that you don't want to hear."*

—18-year-old male

*"Books or TV shows that shows what
really happens to people so they could
see what is really going on..."*

—18-year-old male

"Dating within your own age group."

—18-year-old male

*"Get to know the person before you get
in a relationship with them. Also you need
to respect yourself enough not to settle
for some dumb ass."*

—19-year-old male

*"I think that if teens tell how they REALLY
feel to their partner, they would feel less
scared or not scared at all, and if teens
talk sooner about someone hurting them
or abusing them they could stop it before
it gets out of hand."*

—17-year-old female

*"I think that strong communication, trust,
and lots of support between people can
help reduce sexual or dating violence.
Also, I feel that information should be
everywhere, in case people do need help."*

—18-year-old male

*"I think what would reduce sexual or
dating violence in teens are less fights,
because less fights would cause
less violence, depending on how bad
the situation is or how they handle
the situation."*

—17-year-old male

*"If teens are given more information
about this topic."*

—18-year-old female

"If their parents become more involved."

—18-year-old male

*"If they had more help and advice,
as in someone they can go to and talk
to without being judged by what they say
and go through in their relationship or
life. Someone outside the family
who won't tell their parents/guardian."*

—17-year-old female

"If they had more people to turn to."

—18-year-old female

*"If they knew what was going on before
they just jumped into a relationship think-
ing they're grown and take the time to see
what they are worth and they
deserve better."*

—18-year-old male

*"I'm not even sure but I think that more
sex education in schools should help..."*

—19-year-old female

NYC Teen Health Map

It's real sad 'cause I do know girls that have been raped in the past. They don't tell anyone, they don't tell the authorities, they feel ashamed or they think it's their fault. Sometimes it's like things happened in the past and it's too late and you should have told your mom or gone to the police. That's why I wanted to participate 'cause I could sort of relate. It's part of trying to get information out to people who've been raped or abused.

—17-year-old male focus group participant that helped develop the NYC Teen Health

The New York City Alliance Against Sexual Assault initiated a series of teen focus groups in 2006 to determine an effective means for developing and distributing resource information to young people. Youth emphasized that the more functional and practical the product, the more likely they are to keep it and use it in the future. The Alliance used this information to develop the NYC Teen Health Map, a foldable pocket subway map on one side and comprehensive adolescent-friendly services resource guide on the back.

"You might know somebody who is in a situation and you can actually help them. It can happen to you, it can happen to anybody and you can give it [the NYC Teen Health Map] to them."

—16-year-old female

After its distribution to four high schools and several youth-serving organizations in NYC in the fall 2006, the Alliance conducted a qualitative evaluation of the Map's utility and appeal to the youth that received the map and gathered youth input about revisions that should be made.

I like that it gives you a bunch of places that you can go and then if you see one that is close to where you live you just turn the map and 'oh! It's right here!'... I can take this train or this.

—15-year-old male

It's good because it's easy to take it anywhere.

—14-year-old female

Based on findings from the evaluation, the NYC Teen Health Map was revised, reprinted and distributed to youth across the city. Since youth are most likely to turn to their friends if they have experienced sexual or dating violence, it is important that youth have these maps both for themselves and to give to their friends.

Yes, I would [carry it with me] and it would be nice to have more to hand them out to friends because they are small and they can fit in your wallet.

—15-year-old male



To order NYC Teen Health Maps call the NYC Alliance Against Sexual Assault at **212.229.0345**

NYC Alliance Against Sexual Assault
27 Christopher Street, 3rd Floor
New York, NY 10014
212.229.0345 phone
212.229.0676 fax
www.nycagainstrape.org



**New York City Alliance
Against Sexual Assault**

Table 14: Overview of Recommendations by Key Findings

Recommendations			
	Prevention	Response	Future Research
Sexual and dating violence is prevalent among NYC youth.	Schools and programs that work with youth should include a focus on primary prevention.	Teens should have access to youth-friendly referral information such as the New York City Teen Health Map.	Research should focus on identifying the root causes of youth sexual and dating violence.
Youth experience sexual violence from people they know.	Prevention efforts should be focused on norms change by addressing the norms that are conducive to, or tolerant of, sexual and dating violence. This can be done by focusing prevention efforts at the community level.	School personnel and others who work with youth should be trained on how to properly handle disclosures including confidentiality and reporting issues and also how and where to refer youth for help.	Future research should explore who is perpetrating sexual violence and what are the underlying norms that are enabling and supporting this violence in society.
Youth tell their friends first, if they tell anyone at all about the violence.	Schools and programs that work with youth should include a focus on primary prevention. An additional recommendation is to develop youth leaders as agents of change.	Resources such as the New York City Teen Health Map should be distributed to youth to help them support their friends.	More research should examine what advice teens are giving to their friends about sexual and dating violence.
Dating violence is often inclusive of both physical and sexual violence.	Prevention programming must include sexual violence in their definitions of dating violence and focus activities on preventing sexual violence within teen relationships.	If a teen discloses dating violence, counselors should inquire about both histories of physical and sexual violence victimization.	More research should be paid to developing tools to measure sexual dating violence.
Youth experience adverse health outcomes as a result of dating violence.	Primary prevention programming should be integrated and collaborative with other health programming.	Primary care providers and other health professionals should talk to adolescents about sexual and dating violence.	Future research should focus on the long-term health effects of sexual and dating violence.
Perpetrating other forms of violence is a risk factor for dating violence perpetration.	School counselors should utilize perpetration of other violence to begin talking with teens about violence in their dating relationships and by people they know.	School staff and other professionals should be trained on how to properly handle disclosures and refer youth to services.	Future research should focus on exploring the connection between gang membership and sexual dating violence perpetration among young males.
Youth who experience nonpartner sexual violence are at an increased risk of being a victim of dating violence.	Secondary prevention should be addressed by health professionals who work with youth screening for sexual violence and referring youth to services.	School staff and other professionals that work with youth should be trained on how to properly handle disclosures and refer youth to services.	Future revictimization research should focus on the links between nonpartner sexual violence and future physical dating or domestic violence.
Youth who experience nonpartner sexual violence frequently experience chronic abuse.	Prevention efforts should be focused on norms change by addressing the norms that are conducive to, or tolerant of, sexual and dating violence. Specifically, there should be an examine of societal and community norms that support child sexual abuse.	School staff and other professionals that work with youth should be trained on how to properly handle disclosures including when and how to report violence and refer youth to services.	More research should be focused on the social norms that contribute to child sexual abuse perpetration.

“Conflict and violence in dating relationships is a large problem in our city, and in my school, and it is imperative to better understand how we can help our young people maintain healthy relationships.”

—participating school principal

Appendix A: Methodology

This study was carried out by the New York City Alliance Against Sexual Assault and the Columbia Center for Youth Violence Prevention (CCYVP) at the Mailman School of Public Health at Columbia University. Initial outreach was conducted with schools to participate in the study. Four schools were selected through convenience sampling (three in Manhattan and one in Brooklyn) and the superintendents and school principals provided written approval for the study. Youth in grades nine through twelve at these four schools were invited to participate and the overall participation rate was 70%.

This study was approved by the three Institutional Review Boards at St. Luke's-Roosevelt Hospital (the NYC Alliance Against Sexual Assault's home IRB at the time of the study), Columbia University, and the NYC Department of Education.

Formative Research

Both partners came to this study with a background in sexual and dating violence research. The Alliance conducts primary research and is the leading organization in applying research to practice in New York City. The Alliance focuses its research on providing best care and on understanding the prevalence and nature of sexual violence in NYC. The Alliance has worked on two previous studies on the topic of sexual violence among youth. First, the Alliance developed and evaluated a prevention poster geared toward young men ages 11–13. This poster was evaluated in several after-school programs in NYC. For the development of the poster, the Alliance conducted extensive research on the key developmental issues facing youth and the context through which young men understand sexual violence. Second, the Alliance has conducted a systematic review of national and citywide literature on the prevalence of sexual violence among high school age youth.

Similarly, CCYVP has a history of focusing on violence prevention. One of the core projects during

the first five years of the Columbia Center for Youth Violence Prevention was researching approaches to addressing dating violence. Its most recent study surveyed 638 young women between 15 and 24 at a large family-planning clinic serving all five NYC boroughs (Davidson, 2004). This was a cross-sectional, quantitative study that provided important information about the experiences of young women in NYC, but it was beyond the scope of the project to investigate the circumstances in which violence occurred, the sequence of events, or the severity or consequences of the violence. Since the sample was all female, there was no information on the perceptions and experiences of young men. In addition, the sample was taken from young women seeking reproductive healthcare, and therefore there was no reference population against which to estimate prevalence. In order to plan appropriate interventions the organizations need to know more about the pathways to violence, and whether there are characteristics that differentiate patterns of violence or protect young people from violence.

Sampling and Subject Selection

This study utilized a multisite, cross-sectional, population-based survey design to examine sexual and dating violence among youth. The study was conducted in four public high schools in New York City. All students enrolled at the four schools were invited to participate in the study.

Initial outreach to fifteen high school principals across the five NYC boroughs was conducted over a four-month period from August to November 2005. Many high school principals were unable to participate due to the study's timing and current workload. Four schools expressed interest in participating and were chosen for this study. In addition, one school was classified as an alternative transfer high school, meaning students must be at least 16 years old and have attended another high school prior to enrolling in the transfer high school.

The transfer high school provides students with an opportunity to earn their high school diploma in a smaller, student-centered learning community. Thus, this was a sample of convenience rather than a representative or random sample.

This study uses a passive parental consent and active student assent structure. A parent letter was developed to explain the study and mailed from each of the four schools on researcher letterhead to all parents/legal guardians. The schools' staff mailed all materials in order to preserve the confidentiality of the students' home addresses. All materials were printed on the researcher's stationary and did not include any endorsement by the school principal or staff.

The parent letter was available in both English and Spanish or English and Chinese. With a low-risk anonymous survey being implemented schoolwide, all of the principals, the principal investigators, and the Institutional Review Boards felt that passive parental consent was sufficient and in line with general Board of Education practice. Attached to the letter was a form for parents to return to the researchers if they did not want their child to participate in the study. An addressed and stamped envelope was included for parents to send this letter back to the researchers. If the parents did want their child to participate no action was required. This is similar to Department of Education procedures for HIV education, condom distribution, and military recruitment.

Students were informed of the survey one week in advance of its administration by their health and physical education teachers and were handed a student information brochure. On the day of the study, students were invited to participate and were asked for verbal assent, to preserve anonymity of participation. Students whose parents opted them out of the study and students who decided not to participate were given alternate activities by the school and did not take part in the survey. The research associate and a teacher, who were trained to review assent information and answer questions, were present in the classroom during the study.

Two high schools used a paper and pencil version of the survey and two used the audio-computer-

assisted (ACASI) version. The school staff arranged for groups of students taking the survey to be in a classroom or gymnasium, outside of instructional time. The research associate distributed the paper copy with pencils or set up the survey on laptops or desktop computers. The students were placed so that they could not see each other's responses. Students were offered a \$10 gift card to Barnes & Noble as a participation incentive.

Due to the sensitive nature of the survey questions, the study partners felt it was imperative to provide students with referral information for counseling services. The Alliance created the NYC Teen Health Map to provide youth-friendly sexual and dating violence referral information in a discrete way. Maps were given to every youth in the four participating schools, regardless of study participation. Trained rape crisis advocates were also available during the entire data collection period in case a student wanted to talk to someone or receive further information. Several members of the research staff were also trained in crisis counseling.

Overall, 1,454 students participated in the study and answered at least one question on the survey. Of these, 64 surveys were incomplete and were eliminated due to the extensive missing data. An additional 20 individuals did not provide responses to any questions on the Conflict in Adolescent Dating Relationships Inventory (CADRI) or the Dating Violence Inventory (DVI) measurements. Finally, 33 students did not answer sufficient questions on the DVI to score at least one scale and 25 students did not answer sufficient questions on the CADRI to score at least one subscale. Thus, the total sample size was composed of 1,312 students who had adequate data to be used in the present analyses. A comparison between those who had sufficient data with those who did not revealed that males were more likely to have large amounts of missing data on surveys (57% vs. 43%, $p < .005$), younger students were more likely than older students to have missing data (15.6 years vs. 15.9 years, $p < .05$), and those who reported using the paper and pencil version opposed to the ACASI (68% vs. 32%, $p < .05$).

The response rate for the study was 70%. In all, 46 parents opted their child out of the study and 52

Table 15: Sample Distribution*

Total Sample: 1,312

(The data from one survey from either gender is missing.)

	% of sample (n)
Gender	
Female	56 (737)
Male	44 (574)
Age	
13 to 14	18 (239)
15 to 16	48 (628)
17 and older	34 (439)
Grade	
9th	28 (369)
10th	25 (321)
11th	24 (317)
12th	23 (298)
Race/Ethnicity	
Latino	73 (962)
Black	19 (245)
White	2 (29)
Asian	3 (43)
Other	2 (31)
Foreign-Born	23 (304)
Speak English at Home	66 (856)
Household Composition	
One-Adult Family	51 (663)
Two-Adult Family	45 (579)
No Adults Living in Family	4 (52)
Sexual Orientation	
Heterosexual	91 (922)
Homosexual	2 (20)
Bisexual	5 (55)
"Not sure"	2 (17)
Survey Method	
Paper/pencil Survey	59 (771)
ACASI	41 (541)
Had Sex in the Last Year	49 (641)

youth opted not to take the survey. More females than males were surveyed (56% vs. 44%). Latinos are overrepresented in this study, representing 73% of the sample. This is due in part to the majority Latino population of three of the participating schools. Future research should be conducted with a representative sample, with schools in all five boroughs and with a diverse student population. The sample distribution is displayed in Table 15.

Survey Design

The same survey questionnaire that was used to survey 638 young women in the CCYVP and Planned Parenthood NYC study was used for this study with a few small differences. Screening questions were removed, and a series of questions on sexual violence, help-seeking and help-giving behaviors, and some open-ended questions were added. The survey was piloted with youth (n=25) in order to determine clarity of the language used and to estimate the time needed to complete the survey. Teenagers' comments were collected and taken into consideration when finalizing the questionnaire.

The Alliance's Research Advisory Committee and Columbia's study advisory committee reviewed the survey instrument, in addition to all the principals involved in the study. Feedback was incorporated and is reflected in the current survey design.

The survey includes questions in the following areas:

1. Demographics,
2. Nature of their dating relationships,
3. Physical/verbal/sexual abuse within past and recent dating relationships,
4. Experiences of nonpartner sexual violence,
5. Exposure to other forms of violence,
6. Help-seeking and help-giving behaviors,
7. Opinions about dating violence and suggestions for future interventions, and
8. Nonintrusive general health questions.

* Missing data excluded.

Numbers rounded to the nearest whole number.

The demographics section included questions on age, sex, grade, race/ethnicity, and working status. This section also included questions on the language most often spoken at home, whether the respondent was born in the United States, and with whom the respondent currently lives. Finally, this section asked if the respondent had started dating or had any romantic and/or sexual relationships. This was used as a screener question for the following sections. This section also included several NYC Youth Risk Behavior Survey (YRBS) items such as respondent marriage status, if they've ever been pregnant or gotten someone pregnant, and how many babies they have or had fathered.

In the second section of the survey, students were asked about the nature of their dating relationships. Respondents were asked about their sexual orientation and if they had sex in the last year. This section also included two YRBS questions: one on forced sex and one on dating violence. The researchers included a follow-up question to both of these about formal help-seeking ("If yes, during the last 12 months, did a boyfriend or girlfriend hurt you so bad that you had to be treated by a doctor or nurse?" and "If yes, did you see a doctor at that time because of this unwanted sexual experience?"). This section also asks questions about their current or most recent partner (regarding sex, if they are still dating, how long they dated, how old the person is, and how important the relationship is/was to the respondent). This section leads directly into section three, which covers behaviors that have occurred during a conflict or argument with their partner within the last year.

In order to assess relationship violence in section three, the Conflict in Adolescent Dating Relationships Inventory, which measures victimization and perpetration of physical, sexual, and emotional/verbal violence by a sexual or romantic partner in the last year was chosen (Wolfe *et al.*, 2001). In addition, to measure lifetime occurrence of violence, the Dating Violence Inventory was employed (Symons *et al.*, 1994). Finally, to assess controlling behaviors and practices by a romantic partner, several items from the World Health Organization (WHO) Multicountry Study were added, including: "My partner is suspicious that I am

unfaithful, tries to keep me from seeing my friends, and gets angry if I speak to another man" (Garcia-Moreno *et al.*, 2005).

Several questions were included to explore non-partner sexual violence. Specifically, the researchers were interested in learning in what context youth were experiencing sexual violence. These questions asked if youth had been forced to have sex or had been sexually abused by a parent or guardian, a family member other than a parent, an older acquaintance, a nonpartner peer, or a stranger. The survey also included questions on the frequency of the abuse.

Exposure to other forms of violence was measured using YRBS questions. Questions included whether the respondent felt unsafe at school or on their way to or from school, if they had carried a weapon in the last 30 days, if they have been threatened or injured with a weapon in the past year, if they had been in a physical fight during the last year, and if they had been a member of a gang in the last year. The YRBS questions were included for purposes of comparison with NYC and national data.

Help-seeking and help-giving behaviors among youth were explored with several detailed questions, including whether the respondent had ever told anyone about experiencing sexual or dating violence, who they told first, how long before they told someone and how many people they told overall. Another series of questions asked if the respondent had received any information or education about dating and sexual violence and from what sources. Finally, several questions asked youth if they have a friend in a violent relationship. If they responded yes, they were asked if they had given their friend any advice and the nature of the advice given.

Open-ended questions were added to gather opinions about dating violence and ideas for prevention programming. Specifically, youth were asked how dating or sexual violence has affected them, what they thought would reduce sexual or dating violence in the lives of teens, and what the schools should do to reduce or prevent sexual or dating violence. The respondents were also given a space to fill out other information that they wanted to share with the researchers on the topic.

Since students who had experienced intimate partner violence needed to answer more follow-up questions than those who had not, we included a series of noninvasive general health questions at the end of the survey to guarantee that all students complete the survey at the same time and therefore protect the confidentiality of those who answer yes to violence questions. Without these questions, the health and relationships survey would have required more time to complete for a participant who has experienced violence in a relationship than for a participant who has not experienced any. These differences in survey completion time could have potentially allowed students to identify those students who reported relationship violence, thus threatening the confidentiality of their responses. The health questions were drawn from the Child Health Illness Profile—Adolescent Edition (CHIP—AE) (Riley *et al.*, 1998). The research associates introduced the survey in a manner similar to that used in college preparatory exams: “Few of you will have time to complete the survey in the time allotted. We expect this. Continue to answer the questions up until I tell you to stop or until you have completed the survey.”

Translations

The piloted survey was translated into Spanish. The experiences and translation of the CADRI as reported by Hokoda and colleagues (2006) were especially helpful in translating that instrument. To ensure the robustness of the translation, the survey was back-translated by a different translator from Spanish to English. Questions that back-translated into confusing wording or different interpretations of the questions were examined by the research team in conjunction with the translators. A final translation was produced and reviewed by Spanish-speaking research staff. Similarly, the parent letters were translated into Spanish and Chinese and were reviewed but not back-translated.

ACASI Programming

Once the survey was finalized in both English and Spanish versions, the surveys were developed into an ACASI program. Little research exists about the effect the gender of the speaker has on survey

completion. For this reason, the study randomized with both male and female voices in both English and Spanish for study respondents completing the ACASI survey. The gender of the voice on the ACASI program made no significant difference in responses or completion rates.

The ACASI program was piloted with both Mac and PC computers, laptops and desktop computers, computers that had different processing powers, and on the specific networks in the two schools. The ACASI program was installed on the school network using an administrator password. The research associates logged into each computer to set up the survey by using their initials and the date. The survey data was stored in a nonreadable file on each computer and was taken off each individual computer at the end of each survey session. No study information was stored on the school computers. Data files were then downloaded as a group into Microsoft’s Excel program and transferred at the end of the data-collection period to the statistical analysis software. During the data-transfer process, several data file errors developed on specific surveys. These data files were sent to the ACASI programmer, who was able to locate the source of the error, correct it, and resend it to the researchers to upload in the database. A total of 24 surveys were corrected in this manner.

Data Entry

A total of 541 surveys (41%) were completed using the ACASI program and the remaining 771 (59%) were completed using the paper and pencil method. The paper surveys were manually entered into the ACASI program. The Alliance held a one-day training in January 2007 to train three data-entry volunteers. The research team conducted data checking on every seventh survey entered into the database and regularly met with the data-entry team to answer questions and provide guidance. After all data were imported into an electronic database for analyses, extensive data cleaning was conducted, including identification of missing information, out-of-range checks, and cross-checking responses between similar questions.

Data Analysis

Frequencies were calculated and reviewed for all variables in the study. Several variables were collapsed into dichotomous variables for the purposes of multivariate analyses. CADRI variables were divided into scales. Bivariate analysis was conducted for variables that were suspect or had been shown to vary by age, ethnicity, or violence history using chi-square tests stratified by gender. Variables significant at the $p < .10$ level were considered for entry into a logistic regression, designed to identify predictors of sexual and physical violence perpetration and victimization. Multivariable odds ratios with associated 95% confidence intervals were computed and reported. All statistics are rounded and reported to the nearest whole number. Percentages that ended in .5 were rounded up if the preceding number was odd and rounded down if the preceding number was even.

The study partners shared a master database and continually sent each other updated syntax for the data analysis. Qualitative data, while not presented in this report, were analyzed using emergent categories to code the data using cross-case analysis. The quantitative analyses as presented in this report were also reviewed by the Alliance's Research Advisory Committee and the CCYVP study advisory group.

Both study partners agreed on the importance of giving the data back to the participants in the study. Individual school-specific reports were created and presented to school personnel, parents, and students for feedback. The study partners continue to work with the specific schools on implementing intervention and prevention programming based on their specific needs.

Limitations

Due to the difficulties in sampling schools for a dating violence study, a nonrandom sampling methodology was utilized. Because some schools had no chance of being sampled, the extent to which this sample represents youth in public schools in NYC cannot be known. Furthermore, it is not known if schools that chose to participate were different from schools that did not choose to participate (they

have higher or lower rates of violence, more committed staff, etc.). However, the study was able to compare the data to NYC YRBS data on several variables and found that estimates were very similar to NYC reported rates of violence. This study focuses only on public high schools. Future research should be conducted with private schools. Despite these limitations the study provides tremendous insight into the violent experiences of youth in NYC.

Validity

Internal Validity

A study is valid if its questions actually measure what they claim to, and if there are no logical errors in drawing conclusions from the data. "Internal validity" is a term that refers to whether variables other than those being studied may have in some way affected the outcome or variable under study. Several threats to internal validity were examined and addressed.

One threat to internal validity is known as the "Hawthorne Effect," which postulates that the expectation or actions of the investigator may contaminate the outcomes of the study. Does administering a survey within the school setting have an impact on the respondents' responses to dating violence questions? This threat has been minimized by not having teachers administer the survey and by assuring participants about their anonymity.

Another threat to internal validity is selection bias. This is a concern—the schools that decided to participate in the study may differ significantly from schools that decided not to participate. This also applies to the second level of sampling: Are students whose parents did not want them to participate significantly different than the students who did participate?

Closely tied to selection bias is maturation bias—the possibility that older youth were more likely to have experienced sexual or dating violence than younger youth. This potential bias was addressed by controlling for age in multivariate models.

Another form of selection bias may occur due to the higher literacy level required to complete the paper and pencil survey compared to the ACASI system,

in which respondents hear the survey being read to them while they see the survey on a computer screen. To address this, efforts were made to lower the literacy level of the survey overall.

History of violence prevention programming is also recognized as a threat to internal validity. Did the schools that participated have a longer history of sexual and dating violence programming in their schools? Would this lead to those youth being more likely to answer in the affirmative to sexual and dating violence behaviors due to these awareness-raising programs? To the study's knowledge, none of the schools that participated had any in-depth, systematic programming on violence prevention.

External Validity

In addition to internal validity, studies should also be concerned with "external validity," which focuses on the possible biases that may occur in generalizing conclusions from a sample to other populations, other settings, and/or other time periods. The population for this study was NYC public high school students. The largest weakness in this study occurred with external validity, due to the nonrandom selection of schools. Due to these limitations, results from this study are not generalizable to the entire public high school student population of New York City.

Despite these threats to external validity, efforts were made to limit the effect of these biases. The training of data collectors helped minimize external validity by ensuring all youth were approached in a similar manner to participate in the study.

Due to the large numbers of Latino youth at three of the four participating high schools, Latino youth are overrepresented in this study. As such, study results may not be generalizable to youth from other racial/ethnic backgrounds.

Construct Validity

"Construct validity" seeks agreement between a theoretical concept (such as dating violence) and a specific measuring device or procedure. Construct validity examines the biases involved in generalizing from the measures or questions to the concept behind them. When the study asks about dating violence is that what is really being measured? Threats to construct validity have been addressed by using validated measurements and by ensuring that the survey instrument was piloted with youth.

Appendix B: Survey Instrument

HEALTHY RELATIONSHIPS SURVEY: DATING AND CONFLICT

* This survey is copyrighted. Please do not replicate the survey in whole or part without prior permission from the New York City Alliance Against Sexual Assault or the Columbia University Center for Youth Violence Prevention (contact research@nycagainstrape.org or vir2002@columbia.edu)

SECTION 1

In order to create a code for your answers, WITHOUT asking for your name or any other information that would identify you, we are going to start by asking a few general questions about you.

- B1. How old are you?
- ☐ 13 years or younger ☐ 18 years old
- ☐ 14 years old ☐ 19 years old
- ☐ 15 years old ☐ 20 years old
- ☐ 16 years old ☐ 21 years or older
- ☐ 17 years old
- B2. Are you?
- ☐ Female
- ☐ Male
- B3. Are you currently:
- ☐ Working part-time
- ☐ Working full-time
- ☐ Not working
- B4. What grade are you in?
- ☐ 9th ☐ 11th
- ☐ 10th ☐ 12th
- ☐ Other grade
- B5. Are you of Latino descent or background?
- ☐ Yes
- ☐ No
- B5a. If yes, which Latino group(s) do you most identify with (or belong to)? *(Choose ALL that apply)*
- I am: ☐ Dominican
- ☐ Puerto Rican
- ☐ Cuban
- ☐ Mexican
- ☐ Another Latino group
- B6. Which racial group(s) do you identify with (or belong to)? *(Choose ALL that apply)*
- I am: ☐ Black (including African American, African, and Caribbean)
- ☐ White
- ☐ Asian
- ☐ Another racial group
- B7. Were you born in the U.S.?
- ☐ Yes ☐ No
- B8. Is English the language you speak at home most of the time?
- ☐ Yes *(If yes, GO TO Question B9)*
- ☐ No
- B8a. If no, what language do you speak at home most of the time?
- ☐ Spanish ☐ French ☐ Hindi
- ☐ Chinese ☐ Creole ☐ Korean
- ☐ Other language

- B9. Who do you **currently** live with? (*CHOOSE ALL THAT APPLY.*)
- ☐ By myself ONLY ☐ Boyfriend or girlfriend
☐ My child/children ☐ Mom/stepmom
☐ Dad/stepdad ☐ Other adult relative
☐ Mother's boyfriend ☐ Other adult (not a relative)
☐ Roommate(s)/Friend(s)
☐ Dad's girlfriend ☐ Brothers/sisters

Some people start dating or having sexual relationships when they are quite young and others start much later.

- B10. Have you started dating, or had ANY romantic and/or sexual relationships?
- ☐ No (*IF NO, PLEASE GO TO PAGE 11, "Section 5"*)
☐ Yes

- B11. Have you **ever** been married?
- ☐ Yes ☐ No

- B11a. If yes, are you **now**:
- ☐ Still married ☐ Divorced
☐ Separated ☐ Widowed

- B12. **If you are female**, have you ever been pregnant (including any abortions or miscarriages)?
- If you are male**, have you ever gotten someone pregnant?
- ☐ Yes ☐ No (*IF NO, PLEASE GO TO Section 2*)

- a) If yes, how many times have you been pregnant? (*for females only*)

If yes, how many times have you gotten someone pregnant? (*for males only*)

- ☐ 1 ☐ 3
☐ 2 ☐ 4 or more

- b) Have you had any babies? (*for females*) / Are you the father of any babies? (*for males*)
- ☐ No ☐ Yes, 2 babies
☐ Yes, 4 or more babies
☐ Yes, 1 baby ☐ Yes, 3 babies

SECTION 2

In this section, we're going to ask you more in-depth questions about your dating and sex life, both now and in the past.

When we ask about your "partners," we mean anyone who you have a romantic or sexual interest in. So a "partner" could be your boyfriend or girlfriend, your man or woman, your sex partner, or someone who you have just gone out with. You could have a serious romantic interest in this person, a sexual interest, or maybe both. You could be committed to this person, or you two could have an "open" relationship, where you date other people.

- R1. First, how do you think of yourself privately?
- I am: ☐ straight
☐ gay/lesbian
☐ bisexual
☐ I'm not sure

- R2. I have dated or gone out with males:
- ☐ in the past ☐ currently
☐ in the past and currently
☐ not at all

- R3. I have dated or gone out with females:
- ☐ in the past ☐ currently
☐ in the past and currently
☐ not at all

- R4. I have dated or gone out with more than one person at a time:
- ☐ in the past ☐ currently
☐ in the past and currently
☐ not at all

- R5. Did you have sex in the last year?
- ☐ No
☐ Yes

- R6. During the past 12 months, did a boyfriend or girlfriend ever hit, slap, or physically hurt you on purpose?
- ☐ No (*If NO, GO TO Question R7*)
☐ Yes

R6a. If yes, during the past 12 months, did a boyfriend/ girlfriend hurt you so bad that you had to be treated by a doctor or nurse?

- ☐ 0 times
- ☐ 1 time
- ☐ 2 or 3 times
- ☐ 4 or more times

R7. Have you ever been physically forced to have sexual intercourse when you did not want to?

- ☐ No *(If NO, GO TO Question R8)*
- ☐ Yes

R7a. If yes, did you see a doctor at that time because of this unwanted sexual experience?

- ☐ No
- ☐ Yes

Now we are going to ask you a lot of questions about your **current or most recent** partner in more detail on pages 5-9. Again, when we ask about your “partners,” we mean anyone who you have a romantic or sexual interest in. A “partner” could be your boyfriend or girlfriend, your man or woman, your sex partner, or someone who you have just gone out with. You could have a serious romantic interest in this person, a sexual interest, or maybe both. You could be committed to this person, or you two could have an “open” relationship, where you date other people.

R8. Do you **currently** have a partner OR have you had a partner **within the last year**?

- ☐ No *(IF NO, PLEASE GO TO PAGE 10, “Section 4”)*
- ☐ Yes

R9. Is this partner:

- ☐ male
- ☐ female

R10. Please choose which statement describes your relationship with this person:

- ☐ I am thinking of somebody who is my partner **right now**.
- ☐ I am thinking of someone I dated **within the past 3 months**.
- ☐ I am thinking of a partner I dated more than 3 months ago but **within the past year**.

R11. How long have you dated or did you date this person?

- ☐ less than a month
- ☐ more than a month, less than 3 months
- ☐ more than 3 months, less than 6 months
- ☐ more than 6 months, less than 1 year
- ☐ 1 year
- ☐ 1 to 2 years
- ☐ more than 2 years

R12. How old is this person now? _____

R13. How important is/was this relationship to you? *(Choose one of the responses below.)*

- ☐ Not at all important
- ☐ Somewhat important
- ☐ Important
- ☐ Very important

R14. Please check which one of the following six answers BEST describes your relationship to this person:

- ☐ We are/were dating other people as well.
- ☐ I am/was dating this person without any definite commitment.
- ☐ I am/was dating this person exclusively.
- ☐ We are/were living together, but not engaged.
- ☐ We are/were engaged.
- ☐ We are/were married.

R15. Please check which one of the following BEST describes your **sexual** relationship with this person:

- ☐ We have not had sex with one another.
- ☐ We only have sex with each other.
- ☐ We allow each other to have sex with other people.
- ☐ I am having sex with other people without telling my partner.
- ☐ I suspect my partner is having sex with others without telling me.

SECTION 3

All dating couples have disagreements. The following questions ask you about things that may have happened to you with your partner while you were having an argument. Put a check in the box that is your best estimate of how often these things have happened with your current or ex-partner **within the past year** [this should be the same partner you just described]. Please remember that all answers are completely anonymous. As a guide, use the following scale:

Never: This has never happened in my relationship.
Seldom: This has happened only 1-2 times in my relationship.
Sometimes: This has happened about 3-5 times in my relationship.
Often: This has happened 6 times or more in my relationship.

During a conflict or argument with my partner in the past year: Put an "X" in appropriate box

	Never	Seldom	Sometimes	Often
RS1. I threatened to hit him/her or throw something at him/her.				
S/he threatened to hit me or throw something at me.				
RS2. I touched him/her sexually when s/he didn't want me to.				
S/he touched me sexually when I didn't want him/her to.				
RS3. I threatened to end the relationship.				
S/he threatened to end the relationship.				
RS4. I did something to make him/her feel jealous.				
S/he did something to make me feel jealous.				
RS5. I destroyed or threatened to destroy something s/he valued.				
S/he destroyed or threatened to destroy something I valued.				

During a conflict or argument with my partner in the past year: *Put an "X" in appropriate box*

	Never	Seldom	Sometimes	Often
RS6. I told him/her that I was partly to blame.				
S/he told me that s/he was partly to blame.				
RS7. I brought up something bad that s/he had done in the past.				
S/he brought up something bad that I had done in the past.				
RS8. I threw something at him/her.				
S/he threw something at me.				
RS9. I said things just to make him/her angry.				
S/he said things just to make me angry.				
RS10. I gave reasons why I thought s/he was wrong.				
S/he gave reasons why s/he thought I was wrong.				

During a conflict or argument with my partner in the past year: *Put an "X" in appropriate box*

	Never	Seldom	Sometimes	Often
RS11. I agreed that s/he was partly right.				
S/he agreed that I was partly right.				
RS12. I spoke to him/her in a hostile or mean tone of voice.				
S/he spoke to me in a hostile or mean tone of voice.				
RS13. I forced him/her to have sex when s/he didn't want to.				
S/he forced me to have sex when I didn't want to.				
RS14. I offered a solution that I thought would make us both happy.				
S/he offered a solution that s/he thought would make us both happy.				
RS15. I threatened him/her in an attempt to have sex with him/her.				
S/he threatened me in an attempt to have sex with me.				

During a conflict or argument with my partner in the past year: *Put an "X" in appropriate box*

	Never	Seldom	Sometimes	Often
RS16. I put off talking until we calmed down.				
S/he put off talking until we calmed down.				
RS17. I insulted him/her with put-downs.				
S/he insulted me with put-downs.				
RS18. I discussed the issue calmly.				
S/he discussed the issue calmly.				
RS19. I kissed him/her when s/he didn't want me to.				
S/he kissed me when I didn't want him/her to.				
RS20. I threatened to hurt him/her.				
S/he threatened to hurt me.				

During a conflict or argument with my partner in the past year: *Put an "X" in appropriate box*

	Never	Seldom	Sometimes	Often
RS21. I ridiculed or made fun of him/her in front of others.				
S/he ridiculed or made fun of me in front of others.				
RS22. I told him/her how upset I was.				
S/he told me how upset s/he was.				
RS23. I kept track of who s/he was with and where s/he was.				
S/he kept track of who I was with and where I was.				
RS24. I blamed him/her for the problem.				
S/he blamed me for the problem.				
RS25. I kicked, hit or punched him/her.				
S/he kicked, hit, or punched me.				

During a conflict or argument with my partner in the past year: *Put an "X" in appropriate box*

	Never	Seldom	Sometimes	Often
RS26. I left the room to cool down.				
S/he left the room to cool down.				
RS27. I pushed, shoved, or shook him/her.				
S/he pushed, shoved, or shook me.				
RS28. I accused him/her of flirting with someone else.				
S/he accused me of flirting with someone else.				
RS29. I deliberately tried to frighten him/her.				
S/he deliberately tried to frighten me.				
RS30. I slapped him/her or pulled his/her hair.				
S/he slapped me or pulled my hair.				

Thinking about the same partner, *how often* would you say:

	Never	Seldom	Sometimes	Often
RS31. S/he tries to keep me from seeing my friends.				
I try to keep him/her from seeing his/her friends.				
RS32. S/he tries to restrict contact with my family.				
I try to restrict contact with his/her family.				
RS33. S/he insists on knowing where I am at all times.				
I insist on knowing where he/she is at all times.				
RS34. S/he ignores me and treats me indifferently.				
I ignore him/her and treat him/her indifferently.				
RS35. S/he gets angry if I speak with another man/woman.				
I get angry if he/she speaks to another man/woman.				
RS36. S/he is often suspicious that I am unfaithful.				
I am suspicious that he/she is unfaithful.				
RS37. S/he checks my cell phone to see who I call. I don't have a cell phone <input type="checkbox"/>				
I check his/her cell phone to see who he/she calls. S/he does not have a cell phone <input type="checkbox"/>				
RS38. S/he checks my e-mail. I don't have email <input type="checkbox"/>				
I check his/her email. S/he does not have email <input type="checkbox"/>				

RS39. My partner and I are/were having sex.

☐ No (*IF NO, go to question RS40a.*)

☐ Yes

RS39a. I have refused to have sex with a condom even when my partner asked me to.

☐ Never

☐ Seldom

☐ Sometimes

☐ Often

☐ My partner has never asked me to use a condom

RS39b. My partner refused to have sex with a condom even when I asked him/her to.

☐ Never

☐ Seldom

☐ Sometimes

☐ Often

☐ I have never asked my partner to use a condom

RS40a. Some people are afraid that their partner will hurt them if they argue or do something their partner doesn't like. How much would you say you are afraid of him/her?

☐ not at all

☐ a little

☐ quite a bit

☐ very afraid

RS40b. Some people are afraid that their partner will hurt them if they argue or do something their partner doesn't like. How much would you say your partner is afraid of you?

☐ not at all

☐ a little

☐ quite a bit

☐ very afraid

SECTION 4

Now we would like you to think back over **ALL** the romantic or sexual relationships that you have **EVER** had in your life, and answer the following questions.

We are going to ask whether you have **EVER** experienced violence in your relationships, current and past. Again, when we ask about your relationship or your "partners," we mean anyone who you have or had a romantic or sexual interest in. So a "partner" could be your boyfriend or girlfriend, the person you call your "man" or "woman," your sex partner, or someone who you have just gone out with. You could have a long-term interest in this person, a sexual interest, or maybe both. You could be committed to this person, or you two could have an "open" or "casual" relationship, where you date other people.

How often in your life has ANY (current or previous) partner EVER: Put an "X" in appropriate box

	Never	Once	Twice	3 times	4 or more times
D1. Pushed or shoved you?					
D2. Held you to keep you from leaving?					
D3. Slapped or hit you?					
D4. Punched you?					
D5. Choked you?					
D6. Threw objects at you?					
D7. Subjected you to reckless driving?					

continued on next page

D8. Threatened to hurt you?					
D9. Threatened to hurt you with a weapon?					
D10. Hurt you with an object or a weapon?					
D11. Tried to force you into sexual activity?					
D12. Raped you?					
D13. Ignored your feelings?					
D14. Criticized you?					
D15. Ridiculed your ideas?					
D16. Shouted at you?					
D17. Called you names?					
D18. Insulted your family?					
D19. Insulted your friends?					
D20. Humiliated you in private?					
D21. Humiliated you in public?					
D22. Made decisions for you?					
D23. Acted extremely jealous?					

SECTION 5

Many people experience sexual violence outside of dating relationships, both by people they know and by strangers. This section asks what types of sexual violence you may have experienced in your life. When we ask about “sexual abuse,” we mean any sexual fondling, touching, oral sex or intercourse (penetration of the vagina or anus with a penis, fingers or object).

How often in your life has: *Put an “X” in appropriate box*

	Never	Once	Twice	3 times	4 or more times
F1. Your parent sexually abused you or forced you to have sex?					
F2. A family member other than a parent sexually abused you or forced you to have sex?					
F3. An older acquaintance (such as a family friend, teacher, minister, neighbor, etc.) sexually abused you or forced you to have sex?					
F4. Someone else your age who you knew but was not your partner sexually abused you or forced you to have sex?					
F5. A stranger sexually abused you or forced you to have sex?					

SECTION 6

- N1. During the past 30 days, on how many days did you **not** go to school because you felt you would be unsafe at school or on your way to or from school?
- ☐ 0 days
 - ☐ 1 day
 - ☐ 2 or 3 days
 - ☐ 4 or 5 days
 - ☐ 6 or more days
- N2. During the past 30 days, on how many days did you carry **a weapon** such as a gun, knife, or club?
- ☐ 0 days
 - ☐ 1 day
 - ☐ 2 or 3 days
 - ☐ 4 or 5 days
 - ☐ 6 or more days
- N3. During the past 12 months, how many times has someone threatened or injured you with a weapon such as a gun, knife, or club?
- ☐ 0 times
 - ☐ 1 time
 - ☐ 2 or 3 times
 - ☐ 4 or 5 times
 - ☐ 6 or 7 times
 - ☐ 8 or 9 times
 - ☐ 10 or 11 times
 - ☐ 12 or more times
- N4. During the past 12 months, how many times were you in a physical fight?
- ☐ 0 times
 - ☐ 1 time
 - ☐ 2 or 3 times
 - ☐ 4 or 5 times
 - ☐ 6 or 7 times
 - ☐ 8 or 9 times
 - ☐ 10 or 11 times
 - ☐ 12 or more times
- N5. At any time during the past 12 months, have you been a member of a gang?
- ☐ Yes
 - ☐ No

SECTION 7

- M1. Did you ever tell anyone about EXPERIENCING ANY physical and sexual violence from a partner?
- ☐ Never happened to me (GO TO QUESTION M2)
 - ☐ Never told anyone (GO TO QUESTION M2)
 - ☐ Yes, I have told someone about the physical violence from a partner
 - ☐ Yes, I have told someone about the sexual violence from a partner
 - ☐ Yes, I have told someone about both the physical and sexual violence from a partner

If yes,

- a) How much time passed before you told someone about the physical and/or sexual violence from a partner?

- | | |
|--|--|
| <input type="checkbox"/> I never told anyone | <input type="checkbox"/> one week |
| <input type="checkbox"/> 6 months | <input type="checkbox"/> less than one day |
| <input type="checkbox"/> 2–3 weeks | <input type="checkbox"/> 7–12 months |
| <input type="checkbox"/> 1–2 days | <input type="checkbox"/> 1 month |
| <input type="checkbox"/> 13–24 months | <input type="checkbox"/> 3–6 days |
| <input type="checkbox"/> 2–5 months | <input type="checkbox"/> more than 2 years |

- b) How many different people have you told about this experience(s)? _____

c) Who did you tell first? (CHOOSE only ONE)

- ☐ parent ☐ doctor or health professional
☐ friend ☐ minister, priest, or rabbi
☐ therapist or counselor ☐ other adult _____

d) Who else did you tell? (CHOOSE all that apply)

- ☐ parent ☐ doctor or health professional
☐ friend ☐ minister, priest, or rabbi
☐ therapist or counselor ☐ other adult _____

e) Did you seek help from a health professional, teacher, or guidance counselor because of this experience(s)?

- ☐ No
☐ Yes, I sought help from _____

M2. Have you received any **information or education** about dating violence?

- ☐ No (go to next question) ☐ Yes

If yes, was this information or education about dating violence from (choose all that apply):

- ☐ school
☐ TV
☐ a friend
☐ a doctor or nurse
☐ magazine
☐ Advertisement
☐ Family member
☐ Brother or sister
☐ Other _____

M3. Have you received any information or education about sexual violence (sexual assault, rape, sexual abuse)?

- ☐ No (go to Question M4) ☐ Yes

If yes, was this information or education about sexual violence from (choose all that apply):

- ☐ school
☐ TV
☐ a friend
☐ a doctor or nurse
☐ magazine
☐ Advertisement
☐ Family member
☐ Brother or sister
☐ Other _____

M4. Do you have a friend in a violent relationship?

- ☐ No (go to next question) ☐ Yes

If yes:

Have you talked to this friend about the violence?

- ☐ Yes ☐ No

Have you called a hotline to figure out how to help your friend?

- ☐ Yes ☐ No

Have you given this friend advice?

- ☐ Yes ☐ No

Have you told him/her to call a hotline?

- ☐ Yes ☐ No

Have you told him/her to talk to an adult?

- ☐ Yes ☐ No

Have you gone with your friend to get some help like at a clinic?

- ☐ Yes ☐ No

Have you told him/her to leave this partner?

- ☐ Yes ☐ No

Have you talked to the partner directly about his/her violence?

- ☐ Yes ☐ No

Have you talked to an adult about your friend's problem?

- ☐ Yes ☐ No

PLEASE ANSWER THE FOLLOWING QUESTIONS IN YOUR OWN WORDS IN THE SPACE PROVIDED

M5. How has dating violence or sexual violence affected you?

M6. What do you think would reduce sexual or dating violence in the lives of teens?

M7. What should the schools do to reduce or prevent sexual or dating violence?

M8. Is there anything else you want to tell us about dating and violence?

Section 8

We have asked you many questions about your dating and personal relationships. Now we would like to ask you some general questions about your health.

For the next 10 statements, check the box to show if you **completely agree, mostly agree, agree a little, or do not agree** with the statement.

	Completely agree	Mostly agree	Agree a little	Do not agree
Q1. I am full of energy				
Q2. When I get sick, I usually recover quickly				
Q3. I am well coordinated				
Q4. I have a lot of good qualities				
Q5. I am very physically fit				
Q6. I have much to be proud about				
Q7. I like being the way I am				
Q8. I am satisfied with how I live my life				
Q9. My muscle strength is really good				
Q10. I feel socially accepted				

Q11. How is your health in general?

- ☐ Excellent
- ☐ Very good
- ☐ Good
- ☐ Fair
- ☐ Poor

These questions are about how you have been feeling over the **PAST 4 WEEKS**. Please check the box to indicate your answer to each question.

In the PAST 4 WEEKS, on how many days...

	No days	1 to 3 days	4 to 6 days	7 to 14 days	15 to 28 days
C1. Did you feel really sick?					
C2. Did you wake up feeling tired?					
C3. Did you tire easily or feel like you had no energy?					
C4. Did you have watery or itchy eyes?					
C5. Did you have a cough?					
C6. Did you have fever or chills?					
C7. Were you dizzy?					
C8. Did you have wheezing or trouble breathing (when you weren't exercising)?					
C9. Did you have chest pain?					
C10. Did you have a headache?					
C11. Did you have aches, pains or soreness in your muscles or joints?					
C12. Did you have a stomach ache?					
C13. Did you have pain that really bothered you?					
C14. Did you vomit or feel like vomiting?					
C15. Did you have trouble eating or have a poor appetite?					
C16. Did you have trouble falling asleep or staying asleep?					
C17. Did you have trouble relaxing?					
C18. Were you nervous or uptight?					
C19. Were you moody?					
C20. Were you irritable or grouchy?					
C21. Did you wake up feeling refreshed?					
C22. Did you feel really healthy?					
C23. Did you feel like you were doing everything just right?					

In the PAST 4 WEEKS, on how many days did a *health or emotional problem* cause you to...

	No days	1 to 3 days	4 to 6 days	7 to 14 days	15 to 28 days
C24. Stay in bed more than half a day, but not miss school?					
C25. Cut down on other things you usually do, but not miss school or stay in bed?					
C26. Have trouble walking?					
C27. Have trouble running?					
C28. Have trouble bending, lifting, stooping or reaching?					
C29. Have trouble using your hands or fingers, like writing with a pencil, tying your shoelaces, or buttoning clothing?					

C30. In the PAST 4 WEEKS, have you lost weight without trying?

- ☐ No
- ☐ Yes, 1 to 4 pounds
- ☐ Yes, 5 to 9 pounds
- ☐ Yes, 10 to 14 pounds
- ☐ Yes, more than 15 pounds

C31. In the PAST 4 WEEKS, on how many days did you exercise or play sports hard enough to make you breathe hard, make your heart beat fast, or make you sweat for 20 minutes or more?

- ☐ No days
- ☐ 1 to 9 days ☐ 14 to 20 days
- ☐ 10 to 13 days ☐ 21 or more days

C32. In the PAST 4 WEEKS, how many sit-ups did you do the last time you did them?

- ☐ No sit-ups
- ☐ 1-10 sit-ups
- ☐ 11-20 sit-ups
- ☐ 21-50 sit-ups
- ☐ 51 or more sit-ups

C33. In the PAST 4 WEEKS, how far did you walk at any one time without resting and without getting tired?

- ☐ I didn't walk at all
- ☐ Less than a quarter of a mile (less than 2 blocks)
- ☐ A quarter mile to one half mile (3 to 6 blocks)
- ☐ One half mile to one mile (6 to 12 blocks)
- ☐ More than one mile (more than 12 blocks)

C34. In the PAST 4 WEEKS, what is the longest time you ran without stopping?

- ☐ I didn't run
- ☐ 1 to 10 minutes
- ☐ 11 to 19 minutes
- ☐ 20 to 29 minutes
- ☐ 30 minutes or more

C35. In the PAST 12 MONTHS, how often did you play on a team that has a coach, other than in gym class?

- ☐ Never
- ☐ Once or twice
- ☐ Several times

C36. In the PAST 4 WEEKS, about how many hours did you usually watch TV or videos on an average school day?

- ☐ None
- ☐ Less than 1 hour
- ☐ 1 to 2 hours
- ☐ 3 to 4 hours
- ☐ 4 or more hours

When was the last time you did this?

	Never	More than a year ago	In the past year	In the past month	In the past week
C37. Rode a bicycle?					
C38. Wore a helmet when riding a bicycle?					
C39. Rode a motorbike (motorcycle, minibike or ATV—all terrain vehicle)?					
C40. Wore a helmet when riding a motorbike?					
C41. Drove a car?					
C42. Wore a seat belt in a car or truck?					

Thinking about your home environment...

	No	Yes	Don't know
C43. Is there a working smoke detector or smoke alarm in your home?			
C44. Does anyone in your home smoke cigarettes?			
C45. Is there a working fire extinguisher in your home?			

C46. In general, is there a certain time of night when you have to be home on SCHOOL NIGHTS?

- ☐ Not usually permitted to go out on school nights
 ☐ Have to be in by 10:00 pm
- ☐ Have to be in by 8:00 pm
 ☐ No particular time
- ☐ Have to be in by 9:00 pm

In the PAST 4 WEEKS, how often did you eat the following types of foods...

	Rarely or never	A few days a month	Several days a week	About every day	More than once a day
C47. Fruits or vegetables?					
C48. Meat, chicken or fish that was not fried?					
C49. 2% or skim milk, or yogurt?					
C50. Grains and cereals like whole-wheat bread, bran cereals, or beans?					
C51. Fast foods, such as fried chicken, French fries, onion rings, and hamburgers?					
C52. Salty foods, such as salted pretzels, chips, or pickles?					
C53. Sweets such as regular soda, doughnuts, candy bars?					

This section is about health problems that you had in the **PAST 12 MONTHS**.

In the PAST 12 MONTHS, how many times did you have...

	None	Once	2 times	3 times	4 or more times
C54. A cold or flu?					
C55. Sinus trouble or sinusitis?					
C56. A sore throat or tonsillitis?					
C57. An ear infection?					
C58. Upset stomach with vomiting or diarrhea or fever?					
C59. Bronchitis?					
C60. A skin infection?					
C61. Pneumonia?					
C62. Infectious mononucleosis (mono)?					

Do you NOW have. . .

	No	Yes
C63. A vision problem?		
C64. A hearing problem?		

C65. About how many tooth cavities have you ever had?

- ☐ None
- ☐ 1 or 2 cavities
- ☐ 3 or 4 cavities
- ☐ 5 or more cavities
- ☐ Don't know

In the PAST 12 MONTHS, did you have any of the following injuries...

	No, never	Yes, but I DID NOT see a doctor or a nurse	Yes, and I DID see a doctor or a nurse
C66. A bad cut or sprain?			
C67. A bad sprain or torn ligament?			
C68. A broken bone, dislocated joint, or broken nose?			
C69. A bad head injury or concussion?			
C70. A bad burn?			

Thinking about your family, about how many days in the PAST 4 WEEKS did your parents or other adults in your family...

	No days	1 to 3 days	4 to 6 days	7 to 14 days	15 to 28 days
C71. Spend time with you doing something fun?					
C72. Talk with you or listen to your opinions and ideas?					
C73. Eat meals with you?					

REMEMBER, you can ask the Research Assistant, the Guidance Counselor, or the health care provider in the school clinic confidentially for help if you would like to.

You can also call any number in the brochure we will give to you to talk to someone about these issues.

THANK YOU FOR TAKING THE TIME TO COMPLETE THIS SURVEY!

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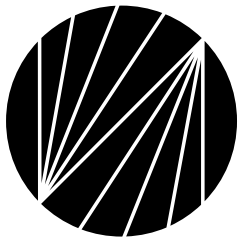
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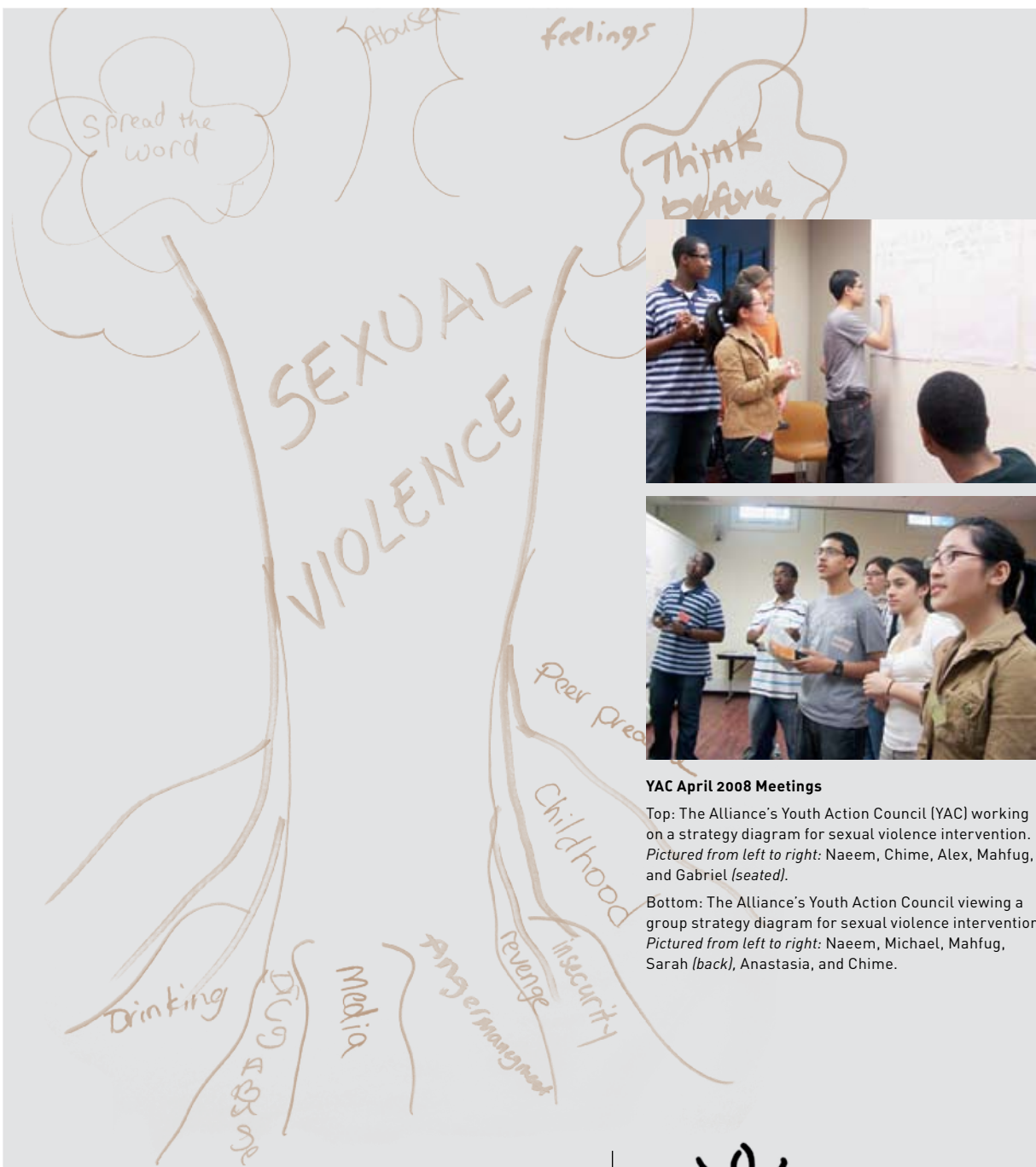
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YAC April 2008 Meetings

Top: The Alliance's Youth Action Council (YAC) working on a strategy diagram for sexual violence intervention. Pictured from left to right: Naeem, Chime, Alex, Mahfug, and Gabriel (seated).

Bottom: The Alliance's Youth Action Council viewing a group strategy diagram for sexual violence intervention. Pictured from left to right: Naeem, Michael, Mahfug, Sarah (back), Anastasia, and Chime.



**New York City Alliance
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